

PLFC MEMBERSHIP APPLICATION

PO Box 605, Port Lincoln SA 5606

Surname: _____ Christian Name: _____

Address: _____

Email Address: _____ Mobile: _____

Postal Address (if different): _____

Occupation: _____ Nationality: _____

DOB: _____ (optional, unless under 18 years)

If you fly, please fill out the following (so your eligibility to fly the club aircraft can be ascertained).

Please select your current licence:

Student Restricted Private Licence Private Pilot Licence
Recreational (student or full) Commercial Pilot Licence

Issued at _____ Licence No/ARN _____

Date of last flight as Pilot _____ Total Hours _____

Please note that the financial member hiring an aircraft through the club is liable for insurance excess on any claim relating to that hire.

OR to join the Port Lincoln Flying Club as a non-flying social member. Yes No

The above particulars are correct and I agree to keep my account in credit.

Signed _____ Date _____

Proposed by _____ Seconded by _____

Under the provision of the club rules, the committee has decided that only applicants whose accounts are now in credit will be elected. Up until the time of election, proposer and seconder are jointly and severally liable for that applicants debts, including subscriptions.

Entry Fee \$10 Annual Subscription \$130

To be paid at time of application. Bank details:
Port Lincoln Flying Club Inc. BSB 633-000 Account No. 144063443