Colonial Virginia Aeromodelers

AMA Chapter 1474

www.FlyCVA.com

Located on Route 5, Charles City County Williamsburg, VA

2027 MEMBERSHIP APPLICATION

Name_____ Date____/____/____
Last First/Preferred

Address_____ City_____ State____ Zip_____

Date of Birth ____/____/____ (Required by AMA) AMA No._____
Month Day Year

Preferred Phone:

(Home) (_____) _____ Spouse's Name & AMA No._____

(Cell) (_____) _____

CHECK MEMBERSHIP TYPE.....DUES

- ☐ **Open Member** **$85.00**
  (18 and over on the date of application)
- ☐ **Youth Member** **No Fee**
  (Under 18 on the date of application)
- ☐ **Associate Member (Non-Flying)** **$10.00**
- ☐ **Family Membership** **$85.00**
  (Includes Spouse and youth members)

NOTES:

1. To qualify for Pro-ration of your Dues as a new member, you must not have been a member of CVA for the past two years.
2. To operate any aircraft, or otherwise use the CVA facility, you must be a CVA member in good standing.
3. The maintenance assessment is a one-time fee that is paid the first time that you join as an Open Member.

Pro-ration of dues:
(New members ONLY, see Note 1)

Jan….$85.00	**Jul…..$49.00**
Feb….$79.00	**Aug…$43.00**
Mar…$73.00	**Sep….$37.00**
Apr….$67.00	**Oct….$31.00**
May…$61.00	**Nov…$25.00**
Jun….$55.00	**Dec….$19.00**

Check Correct Boxes

- ☐ **New Member**
- ☐ **Renewal Member**

$_____

MEMBERSHIP DUES **$**_____

$_____

All applications are subject to club approval.

I AGREE TO ABIDE BY ALL CVA CLUB RULES, BYLAWS AND THE AMA SAFETY CODE AND TO DISPLAY MY CVA MEMBERSHIP CARD WHEN CONDUCTING FLYING ACTIVITIES.

Signature_____

MAINTENANCE ASSESSMENT
$35.00 (See Note 3)

Total

Enclose a check made out to CVA. (AMA membership will be verified on the AMA website prior to approval for CVA membership)

MAIL TO ------❼

Fred Hill
103 Aspen Ct
Williamsburg, VA
23185

You will be notified by e-mail when the monthly minutes have been published to the web. **(*Please print clearly)***

_____@_____

E-mail Address