

**Colonial Virginia Aeromodelers**  
**AMA Chapter 1474**  
 www.FlyCVA.com  
 Located on Route 5, Charles City County Williamsburg, VA



**2026**  
**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.

**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.**

**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** \$ \_\_\_\_\_

**MAINTENANCE ASSESSMENT**  
 \$35.00 (See Note 3) \$ \_\_\_\_\_

**Total** \$ \_\_\_\_\_

Signature \_\_\_\_\_

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

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

**MAIL TO ----->**

**Jon Persons**  
**6339 Centerville Rd.**  
**Williamsburg, VA**  
**23188**

\_\_\_\_\_  
 E-mail Address @ \_\_\_\_\_