



New Membership Application Form

Details of Applicant

Surname: _____

First Names: _____

Address: _____

Suburb: _____

State: _____ Postcode: _____

D.O.B. _____ Age _____

Occupation: _____

Pensioner (PCC No) _____

Contact Details

Home: _____ Mobile _____

Email: _____

Have you ever been affiliated with the MAAA/MASA in the Past? Yes/No

If so what was your MAAA/MASA Number:

Are you currently affiliated through another club?
Yes/No

If so which club? _____

Current Flying Status:

- Bronze Wings
- Silver Wings
- Gold Wings
- Instructor
- Control-Line
- None

In making this application I agree to abide by all AMA and MAAA rules

Signed _____

Proposed by (AMA Member)

Surname _____

First Name _____

Signature _____

Date _____

Seconded by (AMA Member)

Surname _____

First Name _____

Signature _____

Date _____

Return completed form to:

AMA Registrar

Paul Pamment
10 Hawthorn Road
Mount Barker 5251
South Australia

treasurer@ama.org.au

NB - Once your application has been considered by the Committee you will be notified of the outcome. Please do not make payment until your membership has been accepted.

For Committee use only

Membership Approved/Not Approved

President _____

Date _____

Applicant notified Yes/No

Secretary _____