Chapter 526 Membership Application

Please print and fill out this form.

National EAA number:			
Last name:	First name:		
Mailing/Home address:			
City:		_ State: Zip	o:
Home phone:	Mobile phone:		
E-Mail address:			
Spouse/partner's name:			
Type of membership:	Jnder age 25, \$10/y Family, \$40/year	_	•
Are you a Licensed Pilot? [Yes No	Are you current?	Yes 🗌 No
Are you a flight instructor? [Yes No	Are you an A&P/IA?	Yes No
Do you own an aircraft? [Yes No	N Number:	
Type or aircraft:			
Are you working on an aircra	ft project?	Yes No	
Type of project and status: _			
Area of expertise in aircraft o	onstruction skills or	experience:	

Submit the completed form with a check for your annual dues. If 80 or over, no check is required.

Mail check to: Marleen Wekell
11213 Redhawk Ct.

Auburn, Ca. 95602