Spokane Soaring Society Membership application

Name:		Spouse	Spouse:		
Address					
City:		State:	Zip		
Occupation:Birthda		Birthday:			
Phone:	Home: Cell		Work		
Emerge					
E-MAIL ADDRESS					
SOAR	ING SOCIETY of AMERICA membership i	s a prerequisite to S	SSS membership		
	Please list SSA Membership number		-		
	SSS INITIATION FEE (one time, non-refundabl		\$375		
	FAMILY MEMBER / Youth INITIATION FEE a persons who have a full SSA Member in the house		\$187.50		
	ANNUAL DUES		\$300		
	SSA Membership Dues		\$80		
	FAMILY MEMBER / Youth DUES available for p have a full SSA Member in the household. Include No magazine subscription is included with this me	es SSA membership.	\$150		
	SSA Membership Dues (Family Member)		\$45		
	OPTIONAL unlimited flying package of club glid	ers for one season	\$250		
	Tow Pilot Only membership (Includes SSA Memb If you tow 4 or more days this season – SSA memb		\$85 ed to you.		
	** VISITING PILOT MEMBERSHIP (available to visiting SSA members from outside 7 period of 30 days)	5 mile radius to cover *** \$500 deposit	\$50 a		
	** VISITING TOW-ONLY MEMBERSHIP for 2	days	\$20		
	TOTAL AMOUNT SUBMITTED		\$		

** Must have proof of currency and proof of SSA membership.

*** The deposit may be a check to be held during the visit and returned if no incidents occur.

Please list your FLIGHT EXPERIENCE:

Total hrs Sailplanes	Po	wer

Ratings: _

Have you ever had an accident or been cited for a violation of a FAR while acting as a pilot or crew member of an aircraft? Please explain:

Signature

Date

Contact the SSS Club Treasurer, Eric Dooyema, at 605-376-8481 for instructions on submitting this application and payment