

# New River Valley Flying Aces

Application (Please Print)

Name \_\_\_\_\_ AMA \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

E – Mail \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Committee Assignment (Check one please)

\_\_\_ Mowing                      \_\_\_ Trash                      \_\_\_  
Maintenance

\_\_\_ Field Work                      \_\_\_ Fun Fly/ Fly In worker

Please check this box if it is okay to publish your contact information.