

Experimental Aircraft Association Chapter 113 Membership Application

Name: _____

Spouse: _____

Home Telephone Number: _____

Cell Number: _____

Street: _____

City: _____ State: _____ Zip: _____

E-Mail: _____

EAA Membership Number: _____

Are you a pilot? _____ If so, what ratings? _____

Do you own (or building) an aircraft? _____ If so, what type? _____

Special interests _____

Special skills _____

Other information _____

How did you find out about EAA 113? _____