

NORTH STAR FLYERS, LLC
Application for Membership

Mail to: Jack Shelton, North Star Flyers, 14708 Yancy St NE, Ham Lake, MN 55304

PERSONAL INFORMATION

Name: _____

Address: _____

Telephone: (home) _____ (cell) _____ (work) _____

E-mail address: _____ Occupation: _____

PILOT DATA

Pilot Certificate Class: _____ Issue Date: _____ CFI? _____

Ratings: _____

Total hours: _____ Last 12 months: _____ Last Flight Review: _____

Medical Certificate Class: _____ Issue Date: _____

Aviation goals: _____

Have you ever been involved in an aircraft accident? Y N

Have you ever had any action taken against your pilot certificate? Y N

Have you ever been convicted of any crime? Y N

Explain any "yes" answers here: _____

EMERGENCY NOTIFICATION DATA

Contact Name: _____ Relationship: _____

Address: _____

Telephone: (primary) _____ (alternate) _____

CERTIFICATION

The information I have provided on this form is complete and accurate.

Signature _____ Name _____ Date _____

