

Clovis Area Modelers

New Member Application

Note: Please provide a brief listing of personal Hobbies, Interests and any special skills on reverse side of form.

Name:		DO	DB:Age:	
Address:				
City:		State:	Zip:	
Contact Phone:		Email Address:		
AMA#:				
Flying experience:	Beginner	Intermediate	Advanced	
• Youth (Until Ag			ite	
Dues	Membership	Website	Email	
Received Signature: Parent o	r Guardian (if under 18		Added Date:	
Mail To Clovis Area Modelers Inc. – Membership		Funds Enclosed Initiation Fee		
c/o Conrad Nerdahl 2400 Hermosa Ave Clovis, CA 93611			Membership Dues	