

# Bald Eagle Flying Club

"AFFORDABLE FLYING FROM PORTLAND, MAINE SINCE 1956"  
[www.baldeagleflyingclub.org](http://www.baldeagleflyingclub.org)



## Membership Application

### To join:

Fill out page 2 of this application and bring to a club meeting or mail to:

Bald Eagle Flying Club  
C/O Jim Stenberg  
25 Stroudwater Rd.  
Portland, ME 04102

Attach the following to your application:

- Copy of current FAA medical certificate (Student pilots must obtain medical before application. Call one of the board members for further information.)
- Copy of pilot's certificate (Except student pilots)
- Copy of last page of logbook (If any)

Financial commitments needed:

*Do not send any payment with your application.*

*Your payment will be accepted after your application is acted on.*

- Initiation fee \$450
- Corporation stock \$300 (refundable upon resignation from club)
- First months dues \$75

Do **one** of the following:

- Have a current member you know sponsor you.

Name of sponsor: \_\_\_\_\_

- Attend a meeting and introduce yourself. Meetings are held every third Monday at 7:00 PM in Conference Room 106, IDEXX Laboratories, One Thomas Dr., Westbrook, ME. (Check the website to confirm meeting time and place.)
- Arrange for an interview with a board member. Please see our web site at <http://baldeagleflyingclub.org> for a list of board members or call Jay Crosby at 207-756-5345.

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## Applicant Information

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Address: \_\_\_\_\_ Citizenship: \_\_\_\_\_  
\_\_\_\_\_ Phone (day): \_\_\_\_\_  
\_\_\_\_\_ Phone (evening): \_\_\_\_\_  
\_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Employer: \_\_\_\_\_ Email: \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Contact Phone: (day) \_\_\_\_\_ (evening) \_\_\_\_\_

### Certificates

Date of last Medical: \_\_\_\_\_ Class: \_\_\_\_\_  
FAA Cert. No.: \_\_\_\_\_

### Student Applicants:

Date of first flight: \_\_\_\_\_ Date of latest flight: \_\_\_\_\_  
Number of hours: (dual) \_\_\_\_\_ (solo) \_\_\_\_\_ (x-country) \_\_\_\_\_  
Name of last instructor: \_\_\_\_\_ Their employer: \_\_\_\_\_

### Certificate Holders:

Private ( ) Instrument ( ) Commercial ( ) CFI ( ) CFII ( ) ATP ( )  
Other Certs. and ratings: \_\_\_\_\_ Date of last BFR: \_\_\_\_\_  
Total hours as PIC: \_\_\_\_\_ Hours in last 12 months: \_\_\_\_\_  
Hours in last 3 months: \_\_\_\_\_ Landings in last 3 months: \_\_\_\_\_  
Year of PP check ride: \_\_\_\_\_ Instructor/FBO for training: \_\_\_\_\_  
FAA actions leading to suspension or re-examination: \_\_\_\_\_

Motor vehicle moving violations in last 12 months (3 years if student pilot) or reported to FAA since PPSEL: \_\_\_\_\_

Flying reference and contact number: \_\_\_\_\_

	Hours:	Total	Last 6 Months
Cessna 172		_____	_____
High Performance		_____	_____
Complex		_____	_____
Other:		_____	_____

I agree that falsification of any statements or information on this application may be grounds for later dismissal from the club and forfeiture of fees paid.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_