



Indianapolis R/C Modelers

Please print the requested information. Mail form or bring to meeting.

DATE OF APPLICATION: _____

NAME: _____ AGE: ____ SPOUSE'S NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONES: HOME: _____ WORK: _____ Cell: _____

E-MAIL ADDRESS: _____

DATE OF BIRTH: _____ AMA MEMBERSHIP NUMBER: _____

**Your AMA Academy of Model Aeronautics membership number is required.
Current membership will be verified with AMA before a club card is issued.**

DUES: The amounts shown reflect applicable Yearly dues. (January 1 to December 31)

_____ SENIOR :(18 and Older)	85.00
_____ JUNIOR :(under 18)	42.50
_____ FAMILY :(All AMA Members in Immediate Family)	115.00

Additional family members for family membership

A DEPENDENT Family member shall be defined as a dependent of an open member and shall not have reached their 16th birthday before July 1st of the year of membership.

Name	Age	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

New Members joining after September 1, will pay ½ amount shown above for current year.

Amount: \$ _____

Please complete this application and send it with your check or money order, payable to the "Indianapolis R/C Modelers, Inc."

Mail To: C/O Vern Doty, Treasurer
6403 West 1000 North
McCordsville IN 46055

Your membership card will be at the next meeting. Our CLUB meetings are held the first Monday at 7 PM each month. If you are not at the meeting, your card will be mailed to your listed address. www.indyrcmodelers.com