

# INDIANAPOLIS R/C MODELERS

## Membership Application

(From your the "FILE" menu, select "Print" to print a copy)

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

Email \_\_\_\_\_@\_\_\_\_\_

AMA NUMBER: \_\_\_\_\_ LEVEL: 1 2 3 4 INSTR

CHANNELS USED: (place number of aircraft with frequency used in blank)

10\_\_ 11\_\_ 12\_\_ 13\_\_ 14\_\_ 15\_\_ 16\_\_ 17\_\_ 18\_\_ 19\_\_ 20\_\_

21\_\_ 22\_\_ 23\_\_ 24\_\_ 25\_\_ 26\_\_ 27\_\_ 28\_\_ 29\_\_ 30\_\_ 31\_\_

32\_\_ 33\_\_ 34\_\_ 35\_\_ 36\_\_ 37\_\_ 38\_\_ 39\_\_ 40\_\_ 41\_\_ 42\_\_

43\_\_ 44\_\_ 45\_\_ 46\_\_ 47\_\_ 48\_\_ 49\_\_ 50\_\_ 51\_\_ 52\_\_ 53\_\_

54\_\_ 55\_\_ 56\_\_ 57\_\_ 58\_\_ 59\_\_ 60\_\_ HAM\_\_\_\_\_ 2.4 \_\_\_\_\_

SPECIAL TALENTS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Mail completed application with a copy of your current AMA card and a check for \$75 (family membership, \$100) payable to "Indianapolis R/C Modelers".

Mail to: **Ron Cassell 4592 Mohr Estates, S Dr.. New Palestine, Ind. 46163**