



# Bits & Pieces RC Club

## MEMBERSHIP APPLICATION

Please Print Legibly:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ AMA# \_\_\_\_\_

Please check the type of membership for which you are applying:

X	Type	Description	Dues
	Full	Provides full flying privileges. Requires proof of AMA membership and initial flight check.	\$50.00/year
	Under 16	Must be accompanied by parent or guardian.	

In consideration of my participation and/or the participation of my children, my guests, or other persons in the club or on the field activities, I hereby for myself, my heir, my executors and/or administrators, waive all rights and claims for damages which I may have against the BITS AND PIECES R/C CLUB and any individuals elected or appointed to act as representatives.

Furthermore, none of the above is responsible for the loss of personal items, nor for any other form of aggravation in connection with the club or field activities.

I recognize that there may be potential hazards in this activity.

In filling out this form, I acknowledge that I have read and full understood my own liability and do accept the restrictions.

By signing this document, I agree to adhere to the rules set for by the Bits and Pieces R/C Club and the Academy of Model Aeronautics (AMA), for flying R/C aircraft. Failure to adhere to these rules may result in my dismissal from Bits and Pieces R/C Club, forfeiture of dues paid and notification to AMA of my dismissal.

Print Full Name: \_\_\_\_\_

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

Print Parent/Guardian Full Name (if under 18) \_\_\_\_\_

Signature of Parent/Guardian (if under 18) \_\_\_\_\_ Date: \_\_\_\_\_

**Please return this completed form along with your dues and a copy of your current AMA or MAAC card. Make checks payable to: Bits and Pieces R/C Club and mail to:**

**Mike Easter  
4725 Basin Street  
Adrian, MI 49221**