



GAA Membership Application "2010"



_____ \$20.00 Enclosed for a "Single" Membership
_____ \$30.00 Enclosed for a "Family" Membership

Member's Name: _____

Spouse's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Number: () _____

Do you want this printed in the Directory? YES _____ NO _____

Work Number: () _____

Do you want this printed in the Directory? YES _____ NO _____

E-Mail Address:(REQUIRED)

Do you want this printed in the Log? YES _____ NO _____

Crew ___ Student ___ Private ___ Commercial ___ Observer ___ Enthusiast ___

Wings Level _____ CAAP Level _____ PAAP Level _____ Observer Level _____

Any additional thoughts for improving the club? _____

Please make CHECKS payable to: GATEWAY AEROSTATIC ASSOCIATION

You may pay at one of the upcoming meetings (or) mail them to:

Gateway Aerostatic Association
c/o Mike Bien
1016 Greystone Manor Pkwy
Chesterfield, MO 63005

Please pay by: DECEMBER 31st, 2009