

MEMBERSHIP APPLICATION

Name:	, DOB:,
	Cell Phone: ()
Email (to receive club news and billings):	
In case of an emergency please notify	:
Relationship:, at pho	ne #: <u>(</u> .
Pilot Certificate #:	, Issue Date:,
Limitations:	
Ratings (check as applicable): Sport, Stu	ident, Private, Comm, ATP,
CFIA, CFIG, Glider, SEL, A8	kP, IA, other(s) (list),
Non-current CFIA or CFIG, Tow Pilot endo	orsement, Tailwheel endorsement
FAA Medical Certificate (check only if curre	ent): Class 1, Class 2, Class 3
Medical Expiration Date:	·
Date last Biennial Flight Review:	in what type aircraft?
Flight Time (total): hours, Pilo	t in Command (PIC) (total): hours,
SEL Time:, Tail wheel Time: _	, Time Towing Gliders:
Glider Flights (total):, Glider Time	e (total):, Last glider flight (date):
List various gliders flown:	·
Any prior aircraft incidents or accidengiving full details—dates, places, circumstant	ts (circle response)? Yes / No. If yes, attach page ces, FAA/NTSB report #, etc.
SSA Member #:_ Note: SES Members are required to maintain current, active	, Expiration Date: membership in the SSA.
SSA/FAI Badges/Awards: Bronze, S	Silver, Gold, Diamond, Lennie
Former or current glider club members	ships (where?):
Current college student? Yes / No. If y	/es, where?

	_ Active			
	_ Active (fam	ily member)		
	_Service			
submitt A prosp mation SES m is requi (to inclu Membe policies determi operate regulate certifica flight ex	eing this application bective new member submitted on this a sembership. Fees, of the discount pilot reship requires known, and procedures, a sined by the Board of with full personal bory, licensing, and intes (and, if required experience and curre	and a release form along with r must then be accepted by a oplication is expected to be trulues, and rates are set by the equipment. A person must be eceiving flight instruction) and also well as the timely payment of <i>f Directors</i> . It is the individual knowledge and understanding insurance requirements to includ, a current and valid medical oncy for the aircraft to be flown.	ate organization. Membership in payment of the initiation fee and majority affirmative vote of the B thful and discovery otherwise with Board of Directors and are subjete an Active member of SES to proport or receive an aero tow from a find adherence to, the club's bylated all associated dues, fees, cost responsibility of a member to enter the possession of the currecentificate), as well as having and Southern Eagles Soaring, Inc., responsibility for the individual and the surresponsibility for the surresponsibility	any other required fees. coard of Directors. Infor- Il result in the termination of oct to change. Membership of oct to change ilot a club-owned sailplane club-owned tow plane. club-owned tow plane. club, regulations, or and assessments as our that club equipment is able federal, state, and local ont and valid ratings and domaintaining the minimum its officer or directors, or
the Te	erms herein conv	reyed, that I will abide by paring, Inc., and that I have	are true and correct, that I i the bylaws and operating p e no known medical defects	olicies and procedures
Signa	ture of Applica	nt:	, Da	te:
1.	Fill out and sign		embership Application the Release and Indemnity A copy of the following:	
	-FAA Airma -Driver's Lic -SSA Membe -Logbook en	n's certificate (both sides), cense (or other government cership Card (if a current m try for most recent Bienn al Certificate (this require	issued picture ID), ember), ial Flight Review,	
3.	Mail <u>all</u> the about the \$700 Initiation		with a check for at least \$30	00 initial installment toward
		Treasurer, Southern Ea PO Box 2211 Butler, GA 31006	gles Soaring, Inc.	
		Below is for	Club Use Only	
	. Foo rooy'd ¢	Data anno al	, Officer's Initials:	A 1' 1 1'f' 1

Member / Guest RELEASE AND INDEMNITY AGREEMENT

the oth	printed name of applicant or guest) guest of a member, of <i>Southern Eagles Soaring, Inc.</i> (SES) wish to fly as pilot or participate in flight operations or other SES activities, and doing so entirely on risk hereby accepts full responsibility for my actions.			
	Therefore, in consideration of permission extended to me by SES, through its office such flight and/or other activities; I do hereby declare and decree that I, my family, radministrators:			
1.	Remise, release and forever discharge Southern Eagles Soaring, Inc. and all its memployees, acting officially or otherwise, from any and all claims, demands, acti account of my death or any injury to me or damage to my property which may occu flights and/or other activities or continuances thereof, as well as all ground and flights.	ons or causes of actions on ir from any cause during said		
2.	Agree to indemnify and hold forever harmless <i>Southern Eagles Soaring, Inc.</i> and all of its members, officers, agents, and employees, acting officially or otherwise, against any actions, causes of actions, claims, demands, damages, expenses and any and all other claims of damages whatsoever which may hereinafter at any time be instituted or recovered against SES by any guest or guests of mine who is a spectator or may fly or otherwise participate in flight operations and/or other activities of <i>Southern Eagles Soaring, Inc.</i> , and			
3.	Assume all risks, including, but not limited to personal injury or property dama operations of SES as a participant or spectator, and	ge in connection with flying		
4.	State that I understand these statements hereby affirmed by me are contractual and not mere recitals. I have carefully considered the contents of this affirmation and release having read and hereby agree to each provision.			
5.	I state that I am in good health and assume responsibility for my physical fitness and well being to participate in SES flying and other activities.			
	Affirmed and enacted by my hand this day of	, 20		
	(Legal signature of applicant/guest)			
	(Witness' printed name and signature)			
 IF N	MEMBER OR GUEST IS UNDER 18 YEARS OF AGE COMPLETE THIS PARENT'S	/GUARDIAN'S RELEASE:		
I, (p	orint your name), am t	the parent/legal guardian of		
the in the oth of the par	ame of minor applicant/guest)	s, ground operations, social and ty Agreement. In consideration aring, Inc. to allow him or her to named minor to engage in flying		
	ditionally, I confirm and agree to be responsible for any and all debts incurred by the she participates as a member of <i>Southern Eagles Soaring, Inc.</i>	above named minor while he		
	Affirmed and enacted by my hand this day of	, 20		
	(Legal signature or Parent/Guardian)			
	(Witness' printed name and signature)			

Form last updated: 12/08