

# INDIANAPOLIS AERO CLUB MEMBERSHIP APPLICATION

New Membership / Renewal \$45

Student Membership \$25 (25 years & under)

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

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Spouse Name: \_\_\_\_\_

Ratings/Aircraft Owned: \_\_\_\_\_

**PLEASE PRINT**

Make Check Payable to:

**Indianapolis Aero Club**

**Mail to: Don Born**

6917 Royal Oakland Way

Indianapolis, IN 46236

(317) 823-6917