

# Midland Helicopter Club

Membership Application / Renewal Form

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

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_

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

Telephone Number : \_\_\_\_\_ Mobile Number : \_\_\_\_\_

D.O.B: \_\_\_\_\_

BMFA Membership Number (if already a member): \_\_\_\_\_

Do you wish the club to renew your BMFA membership?

Please Tick.

Yes

No

*BMFA insurance is **MANDATORY**. If personal BMFA renewal is preferred, proof of insurance will be required before you are allowed to fly on the club site.*

Model Flying Experience :

Years \_\_\_\_\_

Months \_\_\_\_\_

I have received a copy of the constitution and rules for the club and agree to abide by those rules.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Please return this form together with appropriate remittance to :-

Mr K.Morton

Midland Helicopter Club

15 Eden Court

Nuneaton

Warwickshire

CV10 9AG