

EAA Chapter 25 -- Membership Form 2021



Name: _____
 Address: _____
 More Address: _____
 City, State, Zip: _____

National EAA Membership No. _____ (Membership in EAA National is required).

	Publish in Chapter Roster?	
	Members	Private
e-mail Address	<input type="checkbox"/>	<input type="checkbox"/>
Home phone	<input type="checkbox"/> yes	<input type="checkbox"/>
Cell phone	<input type="checkbox"/> yes	<input type="checkbox"/>
Business phone	<input type="checkbox"/> yes	<input type="checkbox"/>
Occupation	<input type="checkbox"/> yes	<input type="checkbox"/>
Employer	<input type="checkbox"/> yes	<input type="checkbox"/>

('Members' means that this information is available to Members in the Roster.

'Private' means available to Officers only for emergency contact.)

DUES #1: Check the appropriate boxes below and enter the dollar amounts to the right.

Membership type	<input type="checkbox"/> Regular (\$25)	<input type="checkbox"/> Student (\$10)	<input type="checkbox"/> Hangar Fund (\$120)	<input type="text" value="\$"/>
Chapter newsletter	<input type="checkbox"/> E-mail (\$0)	<input type="checkbox"/> USPS \$10		<input type="text" value="\$"/>
Total Amount of Dues				<input type="text" value="\$"/>

As an EAA Chapter, we are interesting in helping others with their flying experiences.

Please give us some of your areas of expertise and experience that you are willing to share:

Aircraft currently Flying (F), Building (B) or Piloted (P) - include letter designation :

1. _____
 2. _____

Other skills you are willing to share with other Chapter members:

1. _____
 2. _____

Questions? Contact Kim V. Johnson, kvince989@gmail.com.

Return to: 1834 Karis Way, Eagan, MN 55122-2673

For office use only:

Entered in Roster: _____

Check#: _____

Date: _____