

WARRIX FLYING GROUP

Membership application/renewal form.

SURNAME _____ FIRST NAME _____

ADDRESS _____

POSTCODE _____ DATE OF BIRTH ____/____/____

TEL.NO _____ E-MAIL _____

For new and renewing members, are you or have you been a member of a model flying club?

Current _____ Lapsed _____ N/A _____ Name of Club _____

S.A.A. _____ B.M.F.A. _____ Member No's (As applicable)

Proficiency Awards held. _____

SUA Operator ID. _____ SUA Flyer ID. _____

(This is the number you must display on your models.) (Proof of holding CAA DMARES or BMFA RCC tests of competency.)

In consideration of becoming a member of Warrix Flying Group, I agree to abide by the following conditions:-

I declare that as a member of Warrix Flying Group, I shall abide by the Club constitution, I shall fly in a safe and considerate manner and conform to the Club flying and safety rules, noise, and site tidiness, and to the law relating to the operation of model aircraft, in particular I acknowledge that I cannot fly unsupervised at the power flying field until I have obtained the relevant S.A.A. Bronze safety certificate, or B.M.F.A. Basic Proficiency or "A" safety certificate.

1. It is a condition of membership that I obtain third party insurance from one of the following bodies. S.A.A. B.M.F.A.
2. In consideration of becoming a member of Warrix Flying Group I hereby indemnify and hold them harmless against any claim which may be made against them arising from my actions or failure to comply with Club or C.A.A. regulations.
3. **Parental duty of care for persons under 18 years of age:** I declare that whilst attending Warrix Flying Group flying site, or any Club organised activity and accompanied by any person under the age of 18 years, that I shall be the person responsible for the safety, wellbeing and supervision of that person.
4. I consent to particulars of my membership being held on computer for the sole purpose of the administration of the Club.
5. I confirm I have read and understood the CAA Privacy Notice relating to registration with the CAA and agree to the BMFA / SAA providing my Name, address, date of birth and email address (if applicable) to the CAA as part of the process
6. I understand that submission of this application (without prejudice) does not guarantee acceptance to the Club.

Signed _____ Date ____/____/____

Please note, any unsigned forms will be returned. (Parent or Guardian to sign if applicant is under 18 years.)

Association and W.F.G. Fees are set at A.G.M.'s. therefore may be subject to change.

(All appropriate fees will be listed on Warrix Flying Group Web site prior to Club A.G.M.)

(New Member/Late renewal £10.00 (plus appropriate fee.)

S.A.A. B.M.F.A. fees as advertised on individual Websites from 1st December.

S.A.A. Family (1 Senior & all juniors at same address) Warrix Junior (under 18 @1stJan. next) £00.00

All Fees due no later than 31st Dec. (Otherwise late renewal fee will be incurred.) (Cash, cheque, online payment.)

Please enter appropriate club fee and your selected insurance provider in spaces below.

Return completed and signed forms by post with payment to:-

W.F.G.Secretary, Colin McCann, 13 Vennel Street, Stewarton, Ayrshire. KA3 5HL.

If using online payment a completed signed form must be E-mailed to Club Secretary at:- colinmccannatwarrix@gmail.com

For online payment, Bank of Scotland, Sort code 80-09-88 Account number 00949376. Fees can also be paid at W.F.G. A.G.M.

Fees Paid: W.F.G. £ S.A.A. £ S.A.A. Family £ B.M.F.A. £

Total Paid: £ Cash*/Cheque*/Online payment* direct to club account. (*delete as appropriate)

Received by _____ Date ____/____/____