

Application for Membership in the Johnstown RC Club

Date Paid: _____ Check #: _____

Name: _____

No & Street: _____

City: _____ State: _____ Zip: _____

Phone No: _____ - _____ - _____

Email: _____

AMA #: _____

Spouse's first name: _____

Make checks payable to "Johnstown RC Club"

Send Application and Check To: Ken Shilling

109 Hoyt Street, Johnstown, PA 15904

Note: All club members must have a current AMA card to fly.

What Channel's do you use:

Do you use 2.4 Mhz: Y N

Date of Birth: ____ / ____ / ____

OK to receive your Newsletter
via Email: Y ____ N ____

Membership Catagories:

Full-Open Member: \$55 _____

Non-Flying Member \$20 _____

Jr. Membership \$10 _____

(Under age 19)

Dues are for the calendar year