

ADDENDUM C: THE CHIEF JOSEPH FLYERS, INC.

MEMBERSHIP APPLICATION & AGREEMENT

In accordance with Article 3 of the club Bylaws, the Board of Directors has established the following form of application for membership and procedures for review and approval.

Application Instructions and New Member Process:

1. Fill out and return the *Membership Application & Agreement* form via email, post, or in person to the club Secretary. One application per individual for spousal pairs.
2. Family members or individuals designated by an organization holding a membership, who wish to exercise flight privileges, are only required to fill out & return the *Family Member/Designated Individual Agreement*, signed by their Active Member sponsor or sponsor organization.
3. The Board of Directors will review and approve or reject each application by majority vote at the next Board meeting. The applicant will be contacted when a decision has been rendered.
4. If approved, arrange to purchase a membership from the club (if the membership cap has not been reached), or from an existing member willing to sell. The selling party shall provide a Bill of Sale.
5. No sale of membership shall be accepted by the club unless all financial obligations of the selling member have been satisfied.
6. No member may sell a membership to anyone not first approved by the Board of Directors. The Vice-President maintains a list of memberships for sale, as well as a membership purchase waiting list.
7. Attend the next membership meeting to get oriented to club operation, members and activities.
8. Have the club Secretary and Treasurer add you to the Membership Roster, group email list, and QuickBooks.
9. To begin flying, contact a club approved CFI (Certified Flight Instructor) and accomplish the items on the club's First Flight Checklist.

How much does this all cost? See Addendum B for a list of current rates for the following:

1. There is a cost for the membership. The price is negotiated between the buying and selling members.
 2. Each member is charged quarterly dues. This covers fixed costs (mortgage, insurance, maintenance, etc.).
 3. There is a per hour charge to fly the Cessna 172. This covers fuel, the engine fund and oil.
 4. There is a charge for Instructor time, paid directly to the instructor.
 5. The average time to get a pilot's license in the US is 60-70 flight hours. Expect a little more time in Wallowa County due to high altitude, winter weather, and summer heat—all factors that increase the time it will take.
 6. In total, one can expect to pay anywhere from \$7000 - \$10,000 to get licensed through the club. Of course, the more one stops and starts or suspends training, the more expensive it will be.
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Return completed applications via email to:

info@chiefjosphflyers.org

Or via post to:

Chief Joseph Flyers, Inc.
PO Box 621
Joseph, OR 97846

More info at the club website: www.chiefjosephflyers.org:

THE CHIEF JOSEPH FLYERS, INC. MEMBERSHIP APPLICATION & AGREEMENT <i>P.O. BOX 621, JOSEPH, OR 97846 info@chiefjosephflyers.org</i>					
APPLICANT INFORMATION					
FULL NAME:					
DATE OF BIRTH:					
STREET:			EMAIL:		
CITY:			STATE:		ZIP:
HOME PHONE:			CELL PHONE:		
MEMBERSHIP TYPE					
INDIVIDUAL ACTIVE MEMBER <input type="checkbox"/>		ORGANIZATIONAL ACTIVE MEMBER <input type="checkbox"/>		SPOUSE OF ACTIVE MEMBER <input type="checkbox"/>	
CERTIFICATES, RATINGS & ENDORSEMENTS					
AIRMAN'S CERTIFICATE NUMBER:				DATE ISSUED:	
CERTIFICATES (Private Pilot, CFI, etc.)		RATINGS (Airplane Single Engine Land, Instrument, etc.)		ENDORSEMENTS (Tailwheel, Complex, High Performance)	
FLIGHT EXPERIENCE					
	TOTAL TIME	COMPLEX	TAILWHEEL	HIGH PERF	IMC
TOTAL HOURS					
LAST 12 MTHS					
IF STUDENT PILOT, HAVE YOU SOLOED?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	
CURRENCY DETAILS					
DATE OF LAST FLIGHT REVIEW:			DATE OF LAST MEDICAL:		
CLASS OF MEDICAL OR BASICMED:					
STATEMENTS OF VIOLATIONS & ACCIDENTS					
HAVE YOU EVER HAD A VIOLATION OR ACTION AGAINST YOUR PILOT CERTIFICATE?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	
HAVE YOU EVER BEEN INVOLVED IN AN ACCIDENT OR INCIDENT INVOLVING AIRCRAFT, REPORTED OR NOT?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	
HAS YOUR DRIVERS LICENSE EVER BEEN SUSPENDED OR REVOKED?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	
HAVE YOU EVER BEEN CONVICTED OF ANY CRIME OR ARE YOU UNDER INVESTIGATION FOR ANY CRIME?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	
HAVE YOU EVER BEEN CONVICTED OF ANY DRUG RELATED ACTIVITIES, INCLUDING DUI?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	
HAVE YOU HAD ANY ROAD ACCIDENTS IN THE PAST 5-YEARS?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	
HAVE YOU EVER BEEN DENIED INSURANCE OF ANY KIND?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	
IF YOU ANSWERED YES TO ANY OF THE ABOVE, PLEASE EXPAIN IN DETAIL ON A SEPARATE PAGE AND ATTACH TO THIS APPLICATION.					

ACKNOWLEDGMENTS		INITIALS
I HAVE READ AND UNDERSTAND THE CLUB BYLAWS AND OPERATING RULES, AND HAVE A COPY OF THE SAME. I AGREE TO ABIDE BY ALL RULES, REGULATIONS AND PROCEDURES OF THE CLUB, THE FAA AND ALL OTHER AGENCIES.		
I UNDERSTAND THAT VIOLATION OF ANY REGULATION MAY BE GROUNDS FOR SUSPENDING OR REVOKING MY MEMBERSHIP AND MAY MAKE ME LIABLE FOR ANY DAMAGES TO PERSONS OR PROPERTY AS A RESULT OF SUCH VIOLATION.		
I AGREE THAT I WILL NOT USE CLUB AIRCRAFT FOR ANY COMMERCIAL, BUSINESS, OR ILLEGAL ACTIVITIES.		
I AGREE TO PAY ALL DUES, FEES AND ASSESSMENTS AS REQUIRED BY THE CLUB BYLAWS AND OTHER RULES AND REGULATIONS UNTIL I NO LONGER HOLD THE MEMBERSHIP.		
I UNDERSTAND THAT FAILURE TO PAY ANY FINANCIAL OBLIGATIONS IN A TIMELY MANNER WILL RESULT IN SUSPENSION OF CLUB PRIVILEGES AND POTENTIAL TERMINATION OF MY MEMBERSHIP.		
IF MY ACCOUNT BECOMES MORE THAN 60 DAYS DELINQUENT, OR IF MY FLIGHT REVIEW OR MEDICAL CERTIFICATE HAS EXPIRED, I AGREE NOT TO FLY THE CLUB AIRCRAFT UNTIL THESE REQUIREMENTS HAVE BEEN MET AND I HAVE SO NOTIFIED A CLUB OFFICER.		
I UNDERSTAND THAT, IF FOUND LIABLE FOR DAMAGES TO CLUB EQUIPMENT DUE TO NEGLIGENCE, I WILL BE HELD RESPONSIBLE FOR THE INSURANCE DEDUCTIBLE, THE UNINSURED PORTION OF ANY DAMAGES, AND ANY OTHER COSTS ASSOCIATED WITH THE CLAIM RESULTING FROM THAT DAMAGE.		
THIS AGREEMENT SHALL BE BINDING UPON HEIRS, MY EXECUTORS, PERSONAL REPRESENTATIVES, ASSIGNS, AND MYSELF.		
SIGNATURE OF ACCEPTANCE:		DATE:
APPLICANTS UNDER 18 YEARS OF AGE MUST HAVE PARENT OR GUARDIAN APPROVAL		
NAME:		RELATIONSHIP:
SIGNATURE:		DATE:
EMERGENCY CONTACT		
PLEASE PROVIDE AN EMERGENCY CONTACT IN THE EVENT NOTIFICATION IS REQUIRED:		
NAME:	RELATIONSHIP:	PHONE NUMBER:
BOARD OF DIRECTORS DECISION		
APPROVED <input type="checkbox"/> NOT APPROVED <input type="checkbox"/>		COMMENTS:
AT LEAST 3 SIGNATURES REQUIRED:		
BOARD MEMBER:		DATE:
BOARD MEMBER:		DATE:
BOARD MEMBER:		DATE:

THE CHIEF JOSEPH FLYERS, INC.
FAMILY MEMBER / DESIGNATED INDIVIDUAL AGREEMENT
 FOR FLIGHT TRAINING IN CLUB AIRCRAFT
P.O. BOX 621, JOSEPH, OR 97846 info@chiefjosephflyers.org

FAMILY MEMBER / DESIGNATED INDIVIDUAL INFORMATION

FULL NAME:

DATE OF BIRTH:

STREET:

EMAIL:

CITY:

STATE:

ZIP:

HOME PHONE:

CELL PHONE:

STATEMENTS OF VIOLATIONS & ACCIDENTS

HAVE YOU EVER BEEN INVOLVED IN AN ACCIDENT OR INCIDENT INVOLVING AIRCRAFT, REPORTED OR NOT?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
HAS YOUR DRIVERS LICENSE EVER BEEN SUSPENDED OR REVOKED?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
HAVE YOU EVER BEEN CONVICTED OF ANY CRIME OR ARE YOU UNDER INVESTIGATION FOR ANY CRIME?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
HAVE YOU EVER BEEN CONVICTED OF ANY DRUG RELATED ACTIVITIES, INCLUDING DUI?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
HAVE YOU HAD ANY ROAD ACCIDENTS IN THE PAST 5-YEARS?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
HAVE YOU EVER BEEN DENIED INSURANCE OF ANY KIND?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

IF YOU ANSWERED YES TO ANY OF THE ABOVE, PLEASE EXPAIN IN DETAIL ON SEPARATE PAGE & ATTACH TO THIS FORM.

ACKNOWLEDGMENTS

INITIALS

I UNDERSTAND THAT FLIGHT IN CLUB AIRCRAFT IS A PRIVILEGE EXTENDED TO ME BY VIRTUE OF MY SPONSOR (FAMILY MEMBER OR AVIATION ORGANIZATION) HOLDING AN ACTIVE MEMBERSHIP IN THE CHIEF JOSEPH FLYERS.

I HAVE READ AND UNDERSTAND THE CLUB BYLAWS AND OPERATING RULES, AND HAVE A COPY OF THE SAME. I AGREE TO ABIDE BY ALL RULES, REGULATIONS AND PROCEDURES OF THE CLUB, THE FAA AND ALL OTHER AGENCIES.

I UNDERSTAND THAT VIOLATION OF ANY REGULATION MAY BE GROUNDS FOR LOSS OF FLIGHT PRIVILEGES AND MAY MAKE ME LIABLE FOR ANY DAMAGES TO PERSONS OR PROPERTY AS A RESULT OF SUCH VIOLATION.

I UNDERSTAND THAT MY OR MY SPONSOR'S FAILURE TO PAY ANY FINANCIAL OBLIGATIONS IN A TIMELY MANNER WILL RESULT IN LOSS OF FLIGHT PRIVILEGES.

I UNDERSTAND THAT, IF FOUND LIABLE FOR DAMAGES TO CLUB EQUIPMENT DUE TO NEGLIGENCE, I WILL BE HELD RESPONSIBLE FOR THE UNINSURED PORTION OF ANY DAMAGES, AND ANY OTHER COSTS ASSOCIATED WITH THE CLAIM RESULTING FROM THAT DAMAGE.

I UNDERSTAND THAT I MAY ONLY EXERCISE FLIGHT PRIVILEGES IN CLUB AIRCRAFT UNTIL I HAVE EARNED MY PRIVATE PILOT CERTIFICATE (FAMILY MEMBER) OR REACHED THAT PHASE OF TRAINING SET FORTH BY MY SPONSOR (STUDENT ON ORGANIZATION'S MEMBERSHIP). I AGREE TO ACTIVELY PURSUE THIS MILESTONE, AS SCHEDULES AND CIRCUMSTANCES ALLOW, WITHOUT TAKING UNDUE ADVANTAGE OF MY FLIGHT PRIVILEGES.

SIGNATURE OF ACCEPTANCE:

DATE:

ACTIVE MEMBER OR ORGANIZATIONAL SPONSOR APPROVAL (REQUIRED)

NAME:

RELATIONSHIP:

SIGNATURE:

DATE: