



West Michigan Flying Club, Inc.

Membership Application

Email this application and all supporting materials to WMFC.Secretary@gmail.com

Johnny Langlois

Secretary, WMFC

(231) 578-4034

WMFC.Secretary@gmail.com

Name _____ Date of Birth _____ Credit Card MC/VISA/Other _____
 (circle one). If other: _____

Address _____ Employer _____ # _____

City _____ State _____ ZIP _____ Occupation _____

Email address _____ Preferred Phone: () _____ Expiration Date: _____
 CVV (three digits on back of card): _____

PROFESSIONAL REFERENCES (BOSS, COLLEAGUE, TEACHER, ETC.) CANNOT BE FAMILY MEMBERS

Reference #1: _____ Relationship: _____ Phone: _____

Reference #2: _____ Relationship: _____ Phone: _____

Reference #3: _____ Relationship: _____ Phone: _____

Pilot ratings currently held (check all that apply)

None Student Private Instrument Commercial CFI CFII ATP

Single Engine Multi-Engine Airplane Seaplane Glider Helicopter

Approximate hours by Rating and Type _____

Medical certificate expiration date _____ Flight Review expiration date _____

Have you ever been involved in an aviation accident? Yes No If "Yes" provide details on additional page.

I hereby apply for membership in the West Michigan Flying Club, Inc. ("WMFC"), and understand that to join the Club as an Active Member, I must:

- (a) Pay a \$500.00 membership fee, (fully refundable upon leaving the Club);
- (b) Pay a non-refundable initial fee of \$450.00 to fly Club aircraft.
- (c) Provide and keep on file valid credit card information to allow dues, flight time and costs to be charged to my credit card by the Club in the event my account becomes more than 30 days past-due

I hereby understand and agree that:

- I must pay monthly dues in an amount set by WMFC, effective upon approval of my application.
- I agree to uphold and abide by the By-Laws and Rules of WMFC as a Member in good standing.
- I hereby give my permission to WMFC to investigate and verify the information given by me on this application, including without limitation my credit history, driving record and flying record
- My listed references may be contacted, and I hold them and WMFC harmless for any information they provide
- I certify that I have never been, nor am I presently, under treatment for alcoholism, drug addiction or mental illness.
- I hereby authorize WMFC to charge the above-provided credit card in accordance with the cardholder agreement for any amounts that are more than 30-days past due on my account.
- I certify that all the information supplied on and with this application is true and complete to the best of my knowledge.

YOUR APPLICATION WILL NOT BE PROCESSED WITHOUT THE FOLLOWING ADDITIONAL ITEMS

(1) YOUR PAYMENT. A \$950.00 check, payable to WEST MICHIGAN FLYING CLUB. Mail it to the address below or drop it off at the hangar.

(2) YOUR DRIVING RECORD. A copy of the applicant's **Automobile Driver Record** from your driver's license State of issuance.

If you have a Michigan's driver's license, you may obtain your record from the Michigan Secretary of State:

Michigan Secretary of State Commercial Lookup Unit, (517) 322-1624

Form: http://www.michigan.gov/documents/bdvr153_16280_7.pdf

Instructions: <http://www.michigan.gov/sos/0,1607,7-127-1627-31868--,00.html>

(3) YOUR CREDIT SCORE. Proof of a credit score of at least 700. Obtain from www.experian.com; www.equifax.com, etc. If you are a minor, you do not need to provide a credit score, but your parents will need to sign a personal guaranty for payment.

EMAIL THIS APPLICATION AND ALL DOCUMENTS to Secretary, Johnny Langlois, wmfc.secretary@gmail.com

Mail check to 551 Airport Road Norton Shores, MI 49441, or drop your check off in the lockbox in the hangar.

Signed _____ Date _____