

KONA RC Flyers, Inc. 73-4269 Kiekie Street Kailua Kona, HI 96740



2022 Membership Application

| Full Name (Please Print): | |
|--|---|
| Today's Date: | _ Telephone: |
| Address: | |
| E-mail: | (Most communication is by e-mail.) |
| (Your e-mail address will be av | vailable to other members unless indicated otherwise.) |
| AMA#: | FAA#: |
| Amount Paid Check: | Amount Paid Cash: |
| (Make checks payable to KONA | RC FLYERS, INC. or KRCF) |
| Annual Dues are \$75.00 + \$10 | for key paid by 31 December for the year beginning 1 |
| January. | |
| Partial year dues are \$60.00 pa after 1 October. | aid after 1 April, \$40.00 paid after 1 July and \$20.00 paid |

We will accept your payment immediately, but you cannot fly models until you provide proof of current AMA membership and registration with the FAA to a corporate officer.

Agreements:

1. I agree to comply with all the AMA SAFETY CODES, Kona RC Flyers Field Safety and Flying rules for all model aircraft operations at all Kona RC Flyers, Inc. flying sites.

2. I agree to abide by and comply with the Kona RC Flyers Inc. Bylaws, and to any changes or modifications that may be made to them during my membership period.

3. I agree that as a condition of membership my failure to comply with all the applicable SAFETY & FLYING RULES found in the Members Handbook and/or failure to conduct myself in a proper manner may result in the revoking of my membership by a majority vote at a membership meeting.

4. I agree to provide both the AMA and a Kona RC Flyers, Inc. officer written notice within ten (10) days of any incident of bodily injury and/or property damage.

5. I agree to EXEMPT AND HOLD HARMLESS Kona R/C Club, its OFFICERS, and MEMBERS from any and all liability including but not limited to personal injury, property damage, or death caused by me, my guests, or other club members.

Signature:_____

*Date:*_____