



EAA Chapter 79 New Member Application

ITEMS IN BOLD ARE MANDATORY

Last Name: _____

Date: _____

First Name (legal name): _____

Middle Initial: _____

Nickname: _____

Spouse Name: _____

National EAA Number: _____

National EAA Member Expiration Date: _____

Birthdate: _____

Street Address: _____

City, State, ZIP: _____

Home Phone: (____) _____

Work Phone: (____) _____

E-mail Address: _____

FAA Ratings: Sport _____ Recreational _____ Private _____ Commercial _____ ATP _____

Instrument _____ CFI _____ CFII _____ A&P _____ SEL _____ MEL _____ Sea _____

Balloon _____ Glider _____ Helicopter _____ Other _____

Aircraft Currently Flying: _____

Restoration/construction Projects: _____

Skills, technical knowledge: _____

Tools Willing to Share: _____

Other Comments: _____

Please give application and \$25 to any officer or mail to:

EAA Chapter 79
PO Box 11132
Spokane, WA 99211-1132



Visit us on the web: www.eaa79.org