

Affiliate Membership (MEM004)

Card number:

Cardholder's name:

| PERSONAL DETAILS | | | |
|---|--|--|--|
| Surname | Given names | | |
| Preferred name | Title | Date of birth | |
| Phone (H) | Phone (M) | Phone (B) | |
| Residential address | | | |
| Suburb | State | Postcode | |
| Postal address (if different) | | | |
| Suburb | State | Postcode | |
| Email | | Occupation | |
| Emergency contact name | | Number | |
| Constitution of the Company (RAAus L I acknowledge that to convert my men need to meet regarding my health, my | nbership from an affiliate member to a flying age, the risks involved and my ability and ler is a limited membership type which does not a RAAus aircraft. | g member there a egitimacy to opera | re specific requirements I te an aircraft in Australia. |
| 1 YEAR - \$39 | | \$ | |
| ADMIN FEE (one off) *save \$10 by submit | ting application online: | \$11.50* | |
| | TOTAL AUTHORISED PAYMENT AMOUNT: | \$ | |
| Payment method: | ☐ MasterCard ☐ Cheque/Mor | ney Order (payable to Rec | reational Aviation Australia Ltd) |

Expiry date:

Signature:

CCV: