



VAA Chapter 37 Membership Form

Name : _____

EAA Number : _____ Expiration date : _____

VAA Number : _____ Spouse Name : _____

Address : _____

City : _____ State : _____ Zip : _____

Home Phone : _____ Cell Phone : _____

E-Mail Address : _____

How would you like to receive the monthly newsletter : mail _____ email _____

Areas of Interest :

- | | |
|--|---|
| <input type="checkbox"/> Meeting and Flying Activities | <input type="checkbox"/> Young Eagles Events |
| <input type="checkbox"/> Fly-in Activities | <input type="checkbox"/> Aircraft Restoration |
| <input type="checkbox"/> Chapter Support | <input type="checkbox"/> Other _____ |

_____ \$24.00 Individual Membership

_____ \$36.00 Family Membership

Please remit to:

VAA Chapter 37
1521 E MacGregor Drive
New Haven, IN 46774
GeoffRobison@vaa37.org