

Pinellas Pilots Association

Membership Application

Full Name _____ Home Phone (____) ____ - _____
 Spouse _____ Work Phone (____) ____ - _____
 Address _____ City _____
 Zip Code _____ Birth Date _____
 Occupation _____ SS # _____
 Employer _____ Since: _____

In case of emergency contact: _____ Phone: (____) ____ - _____

How were you referred to the PPA? _____

Two personal references that can vogue for your character and your credit worthiness:

<u>Name</u>	<u>Phone</u>	<u>Relationship</u>
_____	(____) ____ - _____	_____
_____	(____) ____ - _____	_____

Student Pilot () Licensed Pilot () Sponsored Membership ()

Ratings _____ Flight limitations _____

Date 1st license issued: _____ Medical Class & issue date: _____

Biennial date: _____ Instructor _____

Last FAA flight exam: _____ Examiner: _____

<u>Aircraft type</u>	<u>Total Hrs.</u>	<u>Last 90 days</u>	<u>Last 12 mths</u>	<u>12 mth local</u>	<u>Estimated X/C</u>
Cessna 152	_____	_____	_____	_____	_____
Cessna 172	_____	_____	_____	_____	_____
Piper 181	_____	_____	_____	_____	_____
Other	_____	_____	_____	_____	_____
Totals	_____	_____	_____	_____	_____
Total Hrs all types: _____		Instrument: _____		R/G: _____	

Flight Instructors name and date last flow with them. Students list intended instructor.

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Do you expect you might ever fly the PPA airplane outside the US? Y / N
Have you even been involved in an aircraft accident? Y / N
Have you even been accused of an FAR violation? Y / N
Have you even been denied aviation insurance? Y / N
Have you even been denied an FAA medical certificate? Y / N
Has your driver's license been suspended, revoked, or have you been involved in any automobile accidents during the last 5 years? Y / N
Were you ever arrested for disorderly conduct, driving under the influence, of alcohol or drugs, or for illegal possession of drugs? Y / N
Have you ever been convicted of any other type of criminal offense? Y / N

Why would you like to join the PPA? _____

What advanced ratings might you pursue? _____

I hereby understand the PPA is a not for profit organization and to hold the flying costs to the lowest possible cost to me, I will do my part in maintaining a clean aircraft fleet. I will treat it like my own because it is. I will adhere to all parts of the FAR's and PPA by-laws and understand that any violation of either the FAR's or the PPA by-laws may result in my immediate release from PPA; if so moved by the Board of Directors.

Signed: _____ Date: _____

I affirm that the statements made on this application are true and complete and I authorize PPA to request and obtain verification of any of the information herein requested. I have received a copy a, read and understand all parts of the constitution and by-laws pertaining to the Pinellas Pilots Association.

Signed: _____ Date: _____

_____ (Board use only below this line) _____

License () Medical () Biennial () Application ()

Fees: _____ References: _____ Orientation: _____