South Shore Radio Control Club, Inc 2023 Membership Application



Please Print Clearly

NAME	DATE OF BIRTH		
AMA NUMBER	AMA	AMA Membership is required	
STREET			
CITY	STATE	ZIP	
TELEPHONE	E-MAIL ADDRESS		
If you wish to not have your private informa membership rosters, etc., please check this	tion such as telephone number, E-Mail address, etc., not included box.	d in club information such as	
SSRCC will not knowingly divulge a mem	ber's information to any third party without specific permission of antee nor will it be liable for personal information provided from		
	TYPE OF MEMBERSHIP Check Applicable		
Renev	vals: On or before March 31st		
0	Open Membership, 18 and over	\$75	
0	Senior Membership, 65 and over	\$50	
Ο	Junior Membership, Under 18	Free	
New N	Members and Renewals after March	n 31st.	
Ο	Open Membership, 18 and over	\$87	
Ο	Senior Membership, 65 and over	\$62	
Ο	Junior Membership, Under 18	Free	
Please indicate your level o	f experience O Beginner O Inter	mediate O Advanced	
If you have any special requirements	such as flight training or additional comments please	indicate here.	
	ip applicant agrees to abide by the AMA National Safety Code a h Shore R/C Club's Constitution and By-Laws, and all club field		
Applicant Signature		Date	

Mail this completed form and a check for the appropriate amount to: David Wilson – Treasurer, 77 County Road, Marion, MA 02738