



Pacific Flying Club
www.PacificFlying.com



FBO ID _____

APPLICATION FOR MEMBERSHIP

Applications are considered completed when the requested information has been given, the form signed, and the applicable membership fees paid. Final acceptance is reserved for the Board of Directors or Executive Director as specified in the Club's Bylaws. Any rejected application will be accompanied by a full refund of membership fees paid.

☐ New Member ☐ Returning Member

PLEASE PRINT

SURNAME: Doe GIVEN NAMES: John

PREFERRED NAME: JJ

ADDRESS: 1234 Main CITY Van

POSTAL CODE: C0C 0C0 PHONE: (Home) (123) 123-1243 (Cell) ()

EMAIL ADDRESS: tester@poissydesign.com

BIRTHDATE: _____ CITIZENSHIP(Country): Canada

SIN (Required for Tuition Tax Receipts): _____

IMMIGRATION STATUS: ☐ Canadian ☐ Permanent Resident ☐ Study Permit
☐ Other: _____

Transport Canada Medical Number: 123123 Medical Category (Circle): ☐ 1 ☐ 3 ☒ 4

Aviation Medical Date: ____/____/____
YYYY MM DD

EMERGENCY CONTACT:

NAME: _____ RELATIONSHIP: _____

HOME:(Main) _____ (Other) _____

ADDRESS: _____ City: _____

HOW DID YOU HEAR ABOUT THE CLUB?

- ☐ On Site Visit ☐ PFC's Web Site ☐ Information Package
☐ Radio ☐ Internet Search ☐ Member of SFU/UBC Aviation
☐ Recommended by Friend/Pilot: Name: _____
☐ Other: _____

