

# Aero Investors, L.C. Pilot Information & Membership Application

Name \_\_\_\_\_ Home (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_

Address \_\_\_\_\_ Work (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Cell (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_

Email \_\_\_\_\_

Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Occupation \_\_\_\_\_

Medical Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Last Flight Review Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Medical Class \_\_\_\_\_ Total Hours Logged \_\_\_\_\_

Hours Last 90 Days \_\_\_\_\_ Last 12 Months \_\_\_\_\_

Tail Wheel Hrs. \_\_\_\_\_ Retractable Hrs. \_\_\_\_\_ Multi-Engine Hrs. \_\_\_\_\_

Certificates and Ratings \_\_\_\_\_

Pilot Certificate # \_\_\_\_\_

Recurrent Training Last 12 Months \_\_\_\_\_

If so, where and when \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_

Total Hours Cessna 172 \_\_\_\_\_

I have reviewed and agree to abide by the Aero Investors LC Member Rules and Bylaws.

Member Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

If member is under 18 years of age: I understand that aviation involves the risk of injury or death and give consent to the named above to participate in the Aero Investors Club. I indemnify and hold harmless Aero Investors LC, it's managers, members, and associated instructors. I accept full responsibility, including financial obligations, for the above named member.

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

(parent or legal guardian)

Address: \_\_\_\_\_ Phone (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_