

**Membership Application and Hold Harmless Agreement Form**  
**For January 1st to December 31st**  
**Arlington Eagles R/C Flyers**  
**AMA Chartered Club 4569**  
**249<sup>th</sup> and Highway 530 Arlington, WA**

**Regular membership dues are \$120 USD**

**Reciprocal (Associate) membership dues are \$20 USD**

**Note:** Reciprocal membership is only open for those that are current paid members of the Skagit RC Club.

New member's (first year only) dues are prorated at \$10.00 for each full month left in the year dues period. Arlington Eagles R/C Flyers members must hold a current AMA card and pay dues as specified in the Club by-laws.

This application must be accompanied by:

1. A copy of a current AMA card or a copy of a receipt from the AMA showing current membership.
2. Cash or check made payable to **Arlington RC Flyers**. All funds are in USD and are not refundable. Please do not mail cash.

Please print the information requested below clearly.

Application is for a new member \_\_\_\_\_ or renewing member \_\_\_\_\_ (check one) for \_\_\_\_\_ (year)

Last name \_\_\_\_\_

First name \_\_\_\_\_

AMA number \_\_\_\_\_ Email Address \_\_\_\_\_

Phone numbers ( \_\_\_\_\_ ) \_\_\_\_\_ home ( \_\_\_\_\_ ) \_\_\_\_\_ cell \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State and ZIP code \_\_\_\_\_

Transmitter type and frequency to be used \_\_\_\_\_

**To use the Arlington Eagles R/C Flyers Flying Site, the member applicant must read and sign this Hold Harmless Agreement for 2019.**

In consideration for my use of the facility known as the Arlington Eagles R/C Flyers Flying Site as authorized by the Arlington Public School Property management. I agree to hold harmless the Arlington School District, it's agents and employees, from and against all claims, damages, losses and expenses, including reasonable attorney fees, in case it shall be necessary to file an action arising out of my presence and use of the Arlington Eagles R/C Flyers Flying site as authorized by the Arlington Public School Property management, which is for bodily injury, illness or death or for property damage, caused in whole or part by my negligent act or omission.

I certify that I am a member of the Academy of Model Aeronautics (A.M.A) Member Number: \_\_\_\_\_ and that I will fly safely in accordance with the current A.M.A. rules.

**Applicant's signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Mail check and documents to Eagles Treasurer 4427 226<sup>th</sup> PI NE Arlington, WA 98223-7603**

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