

Card Number

Membership Form

2025/2026

			IVEII INAIIIES		
Preferred Name	ed NameDate of Birth//Partner's Name				
Address					
Email					
ome Phone				MAAA No	
Current Wings Rating (Tid	ck) Bronze	Silver ☐ Gold	☐ Instructor ☐	or Nil Rating 🗆	
Previous Club (New Mem	•			_	
MAAA Parent Club (Asso	ciated Members	Only			
Category	Join Fee	Club	MAAQ	Total New Member	- U
Junior	\$0	\$20	\$40	\$60	\$60
Senior	\$0	\$20	\$120	\$140	\$140
Senior Pensioner	\$0	\$20	\$120	\$140	\$140
Associate	\$0	\$20	MAAA Paid		\$20
Associate Pensioner	\$0	\$20	MAAA Paid	\$20 be due upon successful D	\$20
 I accept the curre 		nenities provided seek medical atter	by the Club.	n the Club Constitution	
 I accept the curre I give permission I agree to pay \$500 to be settled between 	for the Club to s 00 excess if involveen concerned	seek medical atter olved in causing d parties)	by the Club. ntion if I require fo amage or injury to	or any reason. o another party. (Amounts	s less than \$500 ar
 I accept the curre I give permission I agree to pay \$5 to be settled betw 	for the Club to s 00 excess if invo veen concerned	seek medical atter blved in causing d parties)Date	by the Club. Intion if I require for amage or injury to the second seco	or any reason. o another party. (Amounts pplicant)	
 I accept the curre I give permission I agree to pay \$5 to be settled betw 	for the Club to s 00 excess if invo veen concerned	seek medical atter blved in causing d parties)Date	by the Club. Intion if I require for amage or injury to the second seco	or any reason. o another party. (Amounts	
 I accept the curre I give permission I agree to pay \$5 to be settled betw Signature Signature	for the Club to s 00 excess if invo veen concerned	seek medical atter blved in causing d parties)Date Date	by the Club. Intion if I require for amage or injury to the control of the contro	or any reason. o another party. (Amounts pplicant)	Membership)
I accept the curre I give permission I agree to pay \$5 to be settled betw Signature Signature The proposer in proposing ides of the proposed new RC flying should seek a new Personal details will not the proposed in the proposed seek and personal details will not the proposed in the proposed new RC flying should seek and personal details will not the proposed in the proposed i	for the Club to s 00 excess if involveen concerned g a new member v member's deta meeting with the t be shared with	Date Date Date Date Date Date Date Seek medical atter Date Date Date Seek medical atter Date Date Date Seek medical atter Date Date Date Comparison of the c	by the Club. Intion if I require for amage or injury to the control of the contro	or any reason. o another party. (Amounts pplicant) arent/Guardian for Junior	Membership)(Proposer) c ensure the bona ll new members to
I accept the curre I give permission I agree to pay \$5 to be settled betw Signature Signature The proposer in proposing ides of the proposed new RC flying should seek a new Personal details will not the proposed in the proposed seek and personal details will not the proposed in the proposed new RC flying should seek and personal details will not the proposed in the proposed i	for the Club to s 00 excess if involveen concerned g a new member v member's deta meeting with the t be shared with	Date Date Date Date Date Date Date Seek medical atter Date Date Date Seek medical atter Date Date Date Seek medical atter Date Date Date Comparison of the c	by the Club. Intion if I require for amage or injury to the control of the contro	or any reason. o another party. (Amounts pplicant) arent/Guardian for Junior int Name ember and shall be able to for club membership. Tota	Membership)(Proposer) c ensure the bona ll new members to
I accept the curre I give permission I agree to pay \$5 to be settled betw Signature Signature The proposer in proposing ides of the proposed new RC flying should seek a new personal details will not information Privacy Act	g a new member weeting with the testage	parties) Date Date Date Trimust be a finantils before proposi SMF committee.	by the Club. Intion if I require for amage or injury to the control of the contro	or any reason. o another party. (Amounts pplicant) arent/Guardian for Junior int Name ember and shall be able to for club membership. Tota	Membership)(Proposer) c ensure the bona al new members to
I accept the curre I give permission I agree to pay \$5 to be settled betw Signature Signature The proposer in proposing ides of the proposed new RC flying should seek a new	g a new member weeting with the testage	parties) Date Date Date Trimust be a finantils before proposi SMF committee.	by the Club. Intion if I require for amage or injury to the control of the contro	or any reason. o another party. (Amounts pplicant) arent/Guardian for Junior int Name ember and shall be able to for club membership. Tota	Membership)(Proposer) c ensure the bona al new members to le under the Pensioner Concession
I accept the curre I give permission I agree to pay \$5 to be settled betw Signature Signature The proposer in proposing ides of the proposed new RC flying should seek a new personal details will not information Privacy Act	g a new member weening with the toe shared with 2009	Date Date Date Try must be a finantils before proposi SMF committee. h any agency or	by the Club. Intion if I require for amage or injury to the control of the contro	or any reason. o another party. (Amounts pplicant) arent/Guardian for Junior int Name ember and shall be able to for club membership. Tota	Membership)(Proposer) c ensure the bona l new members to le under the

Payment to be made to Suncoast Model Flyers Inc. BSB: 064 -420 A/C 1026-3697 and simultaneously email completed form to parishneil005@gmail.com