



## Membership Application/Renewal

Personal Info					
Last Name		First Name		Initial(s)	
Address			City		Province
Postal Code	Home Phone		Other Phone		Date of Birth
Occupation			Email		
Emergency Contact Info					
Name		Relation	Phone Number		Alt. Phone Number
Licence					
Licence Number		Country of issue		Date of issue	
Medical Number		Medical Category		Date of Medical	
SAC Instructor number		SAC Official Observer Number		Radio operator Number	
Experience					
Glider		Glider Instructor (Class/Exp.)		Launches (Total)	(Last 12 Months)
P1 (Total)	(Last 12 Months)	P2 (Total)	(Last 12 Months)	Instructor (Total)	(Last 12 Months)
FAI Badges Held					
Gliders Flown (Solo)					
Power		Instructor (Class/Exp.)		Other Ratings / Endorsements	
P1 (Total)	(Last 12 Months)	P2 (Total)	(Last 12 Months)	Tow (Total)	(Last 12 Months)
Membership					
<input type="checkbox"/> New Membership <input type="checkbox"/> Renew Membership <input type="checkbox"/> Cancel Membership					
Club Membership \$ _____ + SAC Membership \$ _____ = Total \$ _____.					
Refer to ACES Fee Schedule for rates. Total is due at time of application. Make cheques payable to "Air Currency Enhancement Society".					
I certify that the information provided in this application is true and correct to be best of my knowledge.					
_____		_____		_____	
Name (print)		Signature		Date	