



MARKS Application Form



I would like to apply for membership in the Mid-Atlantic Radio Kontrol Society, MARKS, model Club. I understand that there are annual dues to be paid by me and that I must be accepted by a majority vote of the MARKS membership. Please complete the following:

Name: _____ Date: _____

Address: _____

City/State/Zip: _____

Phone Number: _____

E-Mail address: _____

Name of club sponsor (not required): _____

AMA number: (MARKS requires AMA membership for all but associate) _____

Please circle membership type below:

	Full	Youth < 18	Associate	Intro- ductory	Vacation
January-June	\$60.00	\$30.00	\$15.00	\$30.00	\$30.00
July-September	\$30.00	\$15.00	\$15.00	\$15.00	\$30.00
October-December	\$15.00	\$7.50	\$15.00	\$7.50	\$30.00
Initiation Fee	\$20.00	\$20.00			
Effective	Upon Voting	Upon Voting	Upon Voting	Immediate	Immediate

Flight Experience: Beginner 1-5 years more than 5 years Instructor

Will you need flight training after you join? Yes No

By signing this application form, I agree to abide by the rules and regulations of both the AMA and The Mid-Atlantic Radio Kontrol Society (MARKS).

Signed: _____ Date: _____

Please complete the above information and return to your sponsor or send to:

Jeff McCarter
27087 N Tourmaline Dr
Hebron, MD 21830