

Date: _____

Spaceport 99s Chapter Member Application/Update

The Spaceport 99s Chapter meets on the 2nd Saturday of each month at different airports or locations in the East/Central Florida area. You will get an email advising you of the location and other information about each meeting. You will also get a quarterly newsletter. We look forward to meeting you.

Name:			
49 ½ (Spouse or significant other)			<u>.</u>
Cell Phone:	Home Phone:		
Email Address:			
Local Street Address:			
City	State	Zip	
Home Airport:			
Pilot Certificates:			
Currently flying? Owner or re		Type aircraft_	
 Chapter Membership dues help 31 each year. They are not prora Optional donation to the chapte forward to help local women ea 	ated. er's scholarship fun	nd is for those a	•
To submit:			
 Email your completed form to <u>T</u> To pay by PayPal, use the Donat http://spaceport99s.org/ or, ma treasurer at 687 Brush Foot Dr. S 	e button on the Sp ail a check with pap	paceport 99s ho per application t	
(option	nal) donation to Chap	Annual Dues: ter Scholarship: Total:	\$25