



Application Form – 2017

EDMONTON RADIO CONTROL HELICOPTER ASSOCIATION

Name..... REQ.

Address.....

City..... Postal Code.....

PH #..... M.A.A.C. # REQ.

Frequencies REQ.

Email Address.....

I will abide by the rules and Regulations that have been established by Model Aeronautics Association of Canada (MAAC) and the Edmonton Radio Control Helicopter Association. I will carry M.A.A.C before flying at the Club Field.

Date..... Applicant's Signature.....

Executive: I have viewed Proof of MAAC. Signed:

I do not wish to have my contact information listed on the ERCHA membership list _____
Please download a copy of the "Bylaws and Objectives" and "Standing Resolutions" from the ERCHA web site at www.ercha.ca or obtain a copy from any member of the executive.

Membership dues are for year ending December 31
\$ 75.00 per year / \$ 25.00 one time registration fee.
Make cheque payable to ERCHA

For mail in address contact us at exec@ercha.ca

For accounting use
Date payment received..... Registration fee Amount \$.....by cash/ cheque

Yearly membership \$.....by cash/ cheque
For 2017