



Membership Application

NEW RENEWAL

Open Membership One Year \$10 Two Years \$15

Junior, under 18 years Free

Name: _____

Address: _____

City: _____ Province / State: _____

Postal Code: _____ Phone: () _____ - _____

Email: _____

EMFSO Number: _____ MAAC / AMA: _____

Amount Enclosed: _____

Declaration: I will abide by the By-Laws, Policies, Procedures and Safety Rules of Electric Model Flyers of Southern Ontario (EMFSO).

Signature: _____ Date: _____

Please make cheque payable to Electric Model Flyers of Southern Ontario and send application to:
C. Murray 15390 8th Concession Schomberg, Ontario L0G 1T0.

Notes:
