

**EXPERIMENTAL AIRCRAFT ASSOCIATION
CHAPTER 347**

MEMBERSHIP APPLICATION

DATE _____

NAME _____

CO-PILOT (wife , friend, etc.) _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE-HOME _____ **OTHER** _____

E-MAIL ADDRESS _____

NATIONAL EAA# & EXP.(must be national member to join ch 347) _____

EMERGENCY CONTACT _____

PROJECTS (CURRENT OR PAST) _____

AIRCRAFT _____

COMMENTS* _____

*please include committee interests, project information, program interests, and any special talents you can share.

MEMBERSHIP IS \$20.00 PER YEAR DUE JAN 1. MEMBERSHIPS ENTERED AFTER JULY 1 ARE \$2.00 PER MONTH FOR THE REMAINDER OF THE YEAR.

Make checks payable to : **EAA 347**
Mail check with application to: **BUD BEARCE**
1614 OXFORD
HOUSTON, TX 77008