RALEIGH DURHAM RADIO CONTROL CLUB

MEMBERSHIP APPLICATION (VERSON: January 2024)



YR:

Day:

Year:

This RDRC membership application is for **Renewal** or **New Membership**. Please fill in this form and follow the directions. Also send a current copy of your AMA Membership. If mailing the Application send to **RDRC at PO Box 563; Youngsville, NC 27596.**

If filing electronically send to raleighdurhammembership@gmail.com.

Last Name:

First Name:

AMA #:

Address:

If you are paying with PayPal, go to **your** PayPal Account and where it asks for where you want to send your payment, insert: raleighdurhammembership@gmail.com.

Attendance at the next Scheduled Club Meeting for a New Open Member is required of all new prospective members. You must be a member of the AMA; there is no exception to this rule. We are an AMA Chartered Club, and our insurance provides protection only for AMA members.

Required dues are in the drop-down boxes below, there is a **one-time** Capital Assessment Fee of **\$55.00** for all New Open Members. Our year begins on January 1st and dues are required to be in no later than Midnight of January 1st. If Dues and/or Applications for Open Members are not in by the end of January 1st, please add a Late Fee of \$50.00. Dues are prorated for New Members Only, at

1/12th. Please make checks payable to: **RDRC** Please read the club bylaws, field, and flight rules, and indicate you have read them by checking the following box.

Application Date Mo:

AMA Expires:

I indicate by checking this box that I have read the <u>RDRC Bylaws</u>, <u>Field and Flight Rules</u>, and agree to follow them. **Required for Membership**

Personal Information required fields in red, others are optional, but we would like to know more about you.

DOB Mo:

City:	State:	Zip:	
Serve in Military?	If so what Branch?		
Contact information, Note: An Email address is required to receive the monthly newsletter or RDRC updates.			
Email address:		Mailing address:	
Contact Number:		Raleigh Durham Radio Control Club, Inc.	
Emergency Contact Name:		P.O. Box 563	
Emergency Contact Number:		lle, NC 27596	
Please Include area code!			
Circle Membership Types below:			
OPEN: \$ 125.00: Associate: \$ 75.00 Student: \$ 25.00 Child: \$ 25.00 Family: \$ 10.00 Name of primary club If applying for associate membership.			
Second Membership being applied for: Youth, Child, or Student			
Name of second membership:			
AMA# Expires: Ema	ail:	DOB:	
Added Late Fee of \$50.00 Added Capital Fee \$55.00			
Amount Enclosed: \$		Print	