Moreton Region Sports Soaring Association Inc.

Membership Form

New members must attend one club meeting and one club day/event and have a proposer.

Please complete all details and return the form to the President/Secretary.

Surname: _____
First Name: _____
Address: _____
_____
Post Code: _____
Date of Birth: ____ / ____ / _____
Emergency Contact Name: _____
Emergency Contact Number: _____
Home Phone: _____
Mobile Phone: _____
Email Address: _____
If you change your email address it is your responsibility to notify the Secretary or Treasurer.

Membership Type:

☐ Senior – Full Member	☐ Senior Pensioner (over 65)
☐ Associate (provide proof of membership from other club)	☐ Junior (full time student, full dependant under 25)
☐ Senior Remote (live 50km+ from Brisbane CBD - no voting rights)	

MAAA #: _____ (If you're a new member write “NEW”)

MAAA Qualifications:

- ☐ Glider - Bronze___ Silver___ Gold___
- ☐ Fixed Wing - Bronze___ Silver___ Gold___
- ☐ Heavy Model Inspector - FW25 ___ FW50___
- ☐ Instructor

Referring MRSSA Member: _____

While MRSSA members fly a broad variety of models, I understand the prime objective of the club is to promote and undertake all forms of radio control soaring flight. Restrictions may be imposed at times by the club executive or at the directive of the property owner regarding the type of flight undertaken. I will assist with field maintenance and my conduct will be civil and respectful.

I will abide by the rules and procedures of the MAAA, MAAQ, those of Moreton Region Sports Association Inc and conditions of any CASA approvals. My flying will always be undertaken in a safe, noise conscious, neighbour friendly manner.

Signed: _____
Date: _____/_____/_____

PRIVACY: The Club respects your privacy, contact details will not to be given to anyone but Committee Members.

Office use only:
Received: _____
Receipt Number: _____
Amount Paid: _____
AUS - _____