



Lake Amphibian Flyers Club

Application for Membership

Full Name _____

Address _____

City, State _____

Country _____

Zip or Postal Code _____

Plane Registration: _____ Serial #: _____

Model: _____ Model Year: _____

Phone - Evening: (____) _____ Day: (____) _____

Cellphone:(____) _____ Fax: (____) _____

E-mail: _____

Nickname for you: _____ Your spouse: _____

In order to join, please send this form with a check to the address below for the initial fee of \$92, which includes first year dues of \$62.

Outside of US or Canada, add \$10 for international postage.

Lake Amphibian Flyers Club
15695 Boeing Court
Wellington, FL 33414-8359
USA