



Chapter 740 Twin State Flyers, Inc.

Membership Application

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ [] Home [] Work [] Mobile

Email: _____ EAA Member Number: _____

Pilot Certificate:	[] None	[] Private
	[] Student	[] Commercial
	[] Light Sport	[] Airline Transport
	[] Recreational	[] Flight Instructor

Aircraft Owner: [] No [] Under Construction [] Flying

Year/Make/Model: _____

Areas of experience, interest or expertise: _____

Tools, equipment or skills you are willing to share: _____

What can the Chapter do to serve your needs? _____

Dues are \$24 per calendar year, pro-rated at \$2/month. Make checks payable to EAA Chapter 740.

EAA Chapter 740
PO Box 5530
West Lebanon, NH 03784

Chapter website: www.eaa740.org

Membership Coordinator: Dino Vlahakis (603-448-3729) cgv601@comcast.net

