



SOUTH TEXAS FLYING CLUB

SouthTexasFlyingClub.org

APPLICATION INSTRUCTIONS

Thanks for your interest in the South Texas Flying Club. To complete your application follow the instructions below:

1. EVERYONE (STUDENTS AND PILOTS)

- a) **Application.** Complete the Membership Application on the following page.
- b) **Check.** Make your check payable to South Texas Flying Club for the type of membership you are applying for. For a limited time, we are waiving the \$100 application fee. You must include the total for the column in which you are applying with your completed application. In the event you are not accepted for any reason into the Club, your check will be returned or a full refund made within 30-day per our Bylaws.

	Regular Membership	Associate Membership
Deposit Amount**	\$5000	\$2500
Application Fee *	\$0	\$0
First Month Dues	\$120	\$60
TOTAL	\$5120	\$2560

* Application fee \$100. (For a limited time, we are waiving the application fee.)

**The regular membership deposit is \$5,000 and \$2500 for associate membership. Associate membership is open to all regular Member's spouses who are at a minimum Private Pilot and wish to fly Club aircraft as PIC. Upon leaving the Club, Members in good standing may sell their membership for whatever the current market will bear. The Board retains the right to approve new Members, and Board approval is required before such said sale. For further details, please read our Bylaws on our website: SouthTexasFlyingClub.org

- c) **Mail.** Send to South Texas Flying Club, P.O. Box 60526, Corpus Christi, TX 78466.



MEMBERSHIP APPLICATION

Please print clearly and complete all applicable items. Include member deposit and dues in your payment, per instructions on the prior page. Attach a copy of your state driver's license, your medical certificate, student pilot, pilot and/or instructor certificates, if applicable).

Date submitted _____ Mail to: South Texas Flying Club, P.O. Box 60526, Corpus Christi, TX 78466
Attn: Treasurer

Name _____ Date of Birth _____
Address _____ Home Phone _____
City _____ State _____ Zip _____ Work Phone _____
U.S. Citizen Yes No Citizenship? _____ Cell Phone _____
Permanent Street Address _____ email _____
City _____ State _____ Zip _____
In Emergency Notify _____ Phone _____

State Driver's license Number _____ State _____ Issue Date _____ Exp Date _____
List a reference other than a relative who knows you well: Name _____ Phone _____
Did a current STFC Member recruit you? If so, whom? _____

Pilot Certificate Number _____ Type _____ Issue Date _____ Ratings _____
Flight Time Logged: Total Time _____ PIC _____ Dual _____ Night _____ X/C _____ IFR _____ IMC _____
Most recent flight review or rating: Date _____ Training Airport _____ FBO _____
Instructor _____
Where did you most recently fly regularly? Airport _____ FBO _____
Phone _____ Contact _____

If the answer to any of the following questions is yes, please provide an explanation on the reverse side of this form.

- Have you ever been convicted of or pleaded no contest to a DWI offense? Yes No
- Have you ever had your drivers license suspended or revoked? Yes No
- Have you ever been convicted of or pleaded no contest to any offense involving substance abuse? Yes No
- Have you ever had your pilot or student pilot certificate suspended or revoked or had an accident while PIC? Yes No

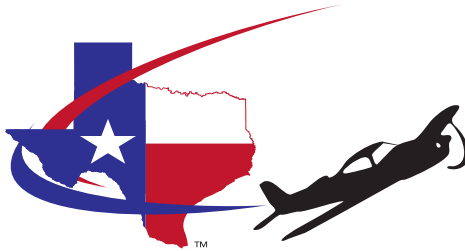
CERTIFICATION: I understand that I am not authorized to take instruction or begin a check-out in a Club aircraft until all applicable fees, deposits and dues have been paid and that I am not authorized to pilot a Club aircraft as Pilot In Command until notification by a Club Officer that this application has been approved. If accepted for membership, I agree to familiarize myself with and abide by and be subject to the Club By-Laws, Standard Operating Procedures and Flight Standards. I understand that there are significant risks associated with flight in small airplanes which I accept and I agree to hold harmless the South Texas Flying Club, its officers, members, lessors, and agents for any loss or injury resulting from my use of Club aircraft or any association with the Club for any reason including, but not limited to, my failure to duly observe provisions of a Club By-Law, Standard Operating Procedure, or Flight Standard. I warrant that the information I have provided on this application is complete, correct and verifiable.

Signature _____ Date _____

If an applicant is under 18, signature of parent or legal guardian who agrees to the certification statement above is required below.

Signature _____ Print Name _____ Date _____

OFFICE USE ONLY Receive Date _____ Check Received Amount \$ _____ Number _____
Version 1.1 Screening Completed By _____ Date _____



**SOUTH TEXAS
FLYING CLUB**
SouthTexasFlyingClub.org

Personal Liability Agreement

Being of sound mind, I the undersigned, fully realize that aviation involves inherent risks. By signing this document I agree to personally assume all risks regarding activities associated with South Texas Flying Club . I agree to release and hold harmless the South Texas Flying Club, its Directors, Board Members and each of its Members from and against all claims. This shall include claims of negligence, damages, losses and expenses arising out of the utilization of any and all aircraft owned (equity owned) or non-equity owned or leased by the Club, its Officers, and its Members, for any injury, illness, death or property damage resulting from the flight or other use of aircraft and equipment utilized by the South Texas Flying Club, but only to the extent that the claims are not covered by insurance held by the South Texas Flying Club.

The undersigned specifically notes and accepts that the insurance coverage held by South Texas Flying Club is adequate to protect passengers and pilots.

I also agree to secure Aircraft Rental Insurance as designated in the STFC Bylaws before scheduling any flight time in any non-equity owned STFC aircraft. I will also provide copies of this Aircraft Rental Insurance to the STFC Board of Officers and this documentation will be part of my permanent membership file.

It is the specific intention of the undersigned Member to bind his / her heirs, assigns, agents, and beneficiaries by the execution of this document.

This document is executed by me in consideration for membership in the South Texas Flying Club.
On this day of _____ of the month of _____, 20____.

Legal signature _____

Printed name of signature above _____
South Texas Flying Club Applicant

Legal signature Parent or Guardian (if applicant is under 18 years of age) _____

Printed name of Parent or Guardian (if applicant is under 18 years of age) _____

Legal signature of STFC Member as Witness _____

Printed name of STFC Member signature above _____