

FORT MYERS FLYING CLUB

New membership applications package



YOU ARE NOW TAKING THE FIRST EXCITING STEP ON BECOMING A MEMBER IN ONE OF THE FIRST AND MOST SUCCESSFUL FLYING CLUBS IN THE STATE OF FLORIDA.

THE EXPERIENCE WHICH YOU ARE ABOUT TO UNDERTAKE IS NOT ONLY GOING TO PROVIDE YOU WITH MANY YEARS OF MEMORABLE FLYING EXPERIENCES, BUT NEW AND LASTING FRIENDSHIPS AND CONTINUING AVIATION EDUCATION.

OUR COMMITMENT IS, TO PROVIDE YOU WITH THE SAFEST AIRCRAFT AVAILABLE, COMPLETE WITH STATE-OF-THE-ART AVIONICS AND AN ENVIRONMENT TO UPGRADE YOUR PERSONAL FLYING ASPIRATIONS.

Johnny Dorning

Membership Chairman

membership@fortmyersflyingclub.com

Phone: 239-634-3422

Email: info@fortmyersflyingclub.com

Web Site: www.FortMyersFlyingClub.Com

Prospective Fort Myers Flying Club Member

The Fort Myers Flying Club application process is as follows:

1. Obtain a pre-membership kit from our Membership Chairman.*
2. Submit:
 - a. your completed application,
 - b. copy of your pilot certificate, **
 - c. copy of your current medical certificate,
 - d. copy of your current Flight review or Wings Program endorsement from your logbook, **
 - e. a completed Star Aviation "Pilot Qualifications" form,
 - f. a signed Fort Myers Flying Club Rental Agreement,
 - g. and a personal check for the amount of the initiation fee

to the Membership Chairperson preferably prior to our Board Meeting, which is held on the third Wednesday of each month. The deadline for application submission is the last day of the month before the month in which you are joining the club. Applications must be complete, with all above items. The new member, one time, entrance fee is:

\$400 for pilots, \$300 for student pilots.

Monthly dues are \$45.00 OR Annual dues are \$495.00

3. The board will review your application and make a recommendation to the members at the General Membership Meeting.

YOU MUST ATTEND A GENERAL MEMBERSHIP OR BOARD MEETING WITHIN THE FIRST TWO MONTHS OF JOINING THE CLUB!

Other meetings may be made "mandatory." These will focus on flying safety or best operating practices. They are held on multiple occasions, of which you will have to attend one meeting per year.

The General Membership Meeting is held on the second Tuesday of each month at the RSW Training and Conference Center at 7:00 p.m.

4. Review the Club Rules and Regulations with the Membership Chairman. You will be issued a key card and membership materials. You then must get checked out by one of the authorized instructors before flying any club aircraft.

If you have any questions, please call our Membership Chairman.

*Membership Chairman:

Johnny Dorning

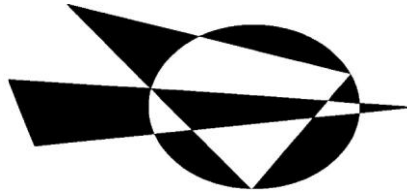
Phone Number: 239-634-3422

E-mail: membership@fortmyersflyingclub.com

E-Mail: info@fortmyersflyingclub.com

Website: www.FortMyersFlyingClub.com

** Items not applicable to Student Pilots



“Fort Myers Flying Club”

Fort Myers First Flying Club
605 Danley Drive, Suite 6, Fort Myers, Florida 33907

Application for Membership

Date Joined: _____

Pilot History Report

Name _____
 Pilot Certificate No. _____ (If you are a student pilot, this is your medical number)
 Email address _____
 Home Phone _____ Work Phone _____
 Pager Number _____ Mobile Phone _____
 Fax Number _____
 Street Address _____
 City, State, ZIP Code _____
 Social Security Number _____ - _____ - _____ Birth date _____
 Driver's License State _____ Driver's License No. _____
 Occupation _____
 Marital Status _____ No. of Dependents _____
 Person to notify in case of emergency:
 Name _____
 Address _____
 Phone _____

FAA PILOT CERTIFICATES NOW HELD AND YEAR OBTAINED

- Student _____
- Private _____
- Commercial _____
- ATP _____
- Flight Instructor _____

FAA PILOT RATINGS NOW HELD AND YEAR OBTAINED

- A.S.E.L. _____
- A.M.E.L. _____
- A.S.E.S. _____
- A.M.E.S. _____
- Instrument _____

FAA Medical Certificate

Date Issued _____ Class _____ Waivers (None or describe) _____

Have you ever had an application for a medical certificate denied? If so, explain.

Training and Refresher Training

Describe Flight Training (school, location, equipment, instructor, etc.)

Date of last Biennial Flight Review or equivalent _____

Do you participate in the FAA Pilot Proficiency Program? Yes No If “yes,” what phase have you completed? I II III IV V

Flying Clubs

Are you now or have you ever been a member of a flying club? Yes No (Please circle one)

If yes, please provide a contact name and number:

Club name _____

Contact name _____

Phone number _____

Pilot-in-Command Experience

Aircraft make/model	Hours in type	Total last 12 months	Total last 90 days	Total Instrument	Total Night

Violations or Actions against Pilot Certificate, Accidents or Incidents

In the space below, fully explain any "YES" answer to the following questions.

1. As pilot-in-command or as co-pilot have you ever had any violations or actions against your pilot certificate? No Yes
2. As pilot-in-command or as co-pilot have you ever been involved in an aircraft accident or incident involving damage to aircraft, reportable or not? No Yes
3. Has your driver's license ever been suspended or revoked? No Yes
4. Have you ever been arrested or convicted of operating an automobile, aircraft, or watercraft while under the influence of alcohol or drugs? No Yes
5. Have you had any automobile accidents in the last five years? No Yes

I, the undersigned, do hereby make application for membership in the Fort Myers Flying Club, Inc., and do agree to abide by the Bylaws and Rules and Regulations of this club. I understand that falsification of any statements made on this form could result in making this application for membership void. I give my permission for my credit report to be viewed by the authorized parties of this club for the purposes of extending a credit account.

Applicant's signature Date

Name of Club Member in good standing (optional) Signature of member in good standing

I, the parent or legal guardian of the above applicant, give permission for the applicant, a minor under age 21, to join the Fort Myers Flying Club, Inc. and will be responsible for the debt incurred while a member of this club. I give my permission for my credit report to be viewed by the authorized parties of this club for the purposes of extending a credit account.

Parent or Guardian's signature and Social Security Number Date



PILOT QUALIFICATIONS



Named Insured _____ Make & Model Aircraft to be Flown _____

Your Name _____
FIRST MIDDLE LAST

Address _____
STREET CITY STATE/PROVINCE ZIP/POSTAL CODE

Date of Birth _____ Education (Advise Diplomas and Degrees if any) _____

Occupation _____ Show percent of work time spent on non-flying duties _____%

Employed by _____ Since _____ Full time Part Time

Address _____
STREET CITY STATE-PROVINCE ZIP/POSTAL CODE

Business Phone_(_____) _____ Home Phone_(_____) _____

List previous employers and position for last 5 years _____

AIRMAN CERTIFICATE NUMBER

Number: _____

Limitations: _____

MEDICAL:

Class: _____

Expiration Date: _____

Limitations: _____

CURRENT CERTIFICATES AND RATINGS

- Student: Since _____ DATE Instrument _____ CLASS Multi-engine, Sea
- Private Night Type rated in _____
- Commercial Single Engine-Land Rotorcraft _____ TYPE OF AIRCRAFT
- Sr. Commercial Single Engine - Sea Glider
- Airline (ATP) Center Line Thrust A&P Mechanic
- Instructor _____ Multi-Engine, Land Other _____

Date of last logged satisfactorily accomplished Biennial Flight Review _____ Make and model _____

Date of last logged satisfactorily accomplished Pilot Proficiency Exam _____ Make and model _____

FLIGHT & GROUND SCHOOL TRAINING COURSES

Name & Location of School	Type of Aircraft	Date	Graduated
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

INITIAL TYPE TRAINING RECCURENCY TRAINING FULL-AXIS MOTION FLIGHT SIMULATOR TRAINING GROUND SCHOOL ONLY AERIAL APPLICATOR SCHOOL

_____ Yes No

INITIAL TYPE TRAINING RECCURENCY TRAINING FULL AXIS MOTION FLIGHT SIMULATOR TRAINING GROUND SCHOOL ONLY AERIAL APPLICATOR SCHOOL

AERIAL APPLICATOR

Number of years experience as an aerial applicator pilot _____ Total hours applying: Herbicides _____ Insecticides _____

List states you are currently licensed to conduct aerial application. _____

Explain any suspension or revocation of any state aerial applicator certificate held by you. _____

LOGGED PILOT HOURS

Total Pilot-In-Command hours for all aircraft _____

ITEMIZED PILOT-IN-COMMAND HOURS						CO-PILOT HOURS
CLASS	MAKE & MODEL	TOTAL	LAST 90 DAYS	LAST 12 MONTHS	INSTRUMENT 6 MONTHS	
INSURED MAKE AND MODEL						
SINGLE-ENGINE FIXED GEAR						
SINGLE-ENGINE RETRACTABLE						
MULTI-ENGINE PISTON						
TURBO-PROP						
JET						
HELICOPTER-RECIP -TURBINE						
-SLING LOAD						
NUMBER OF WATER LANDINGS & TAKEOFFS						

-ANSWER ALL QUESTIONS -

Any person who knowingly and with intent to defraud any insurance company or other person who files an application for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime.

- | | | |
|---|------------------------------|-----------------------------|
| 1. Have you ever had an aircraft claim, incident or accident? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Have you ever been cited or fined for violation of an aviation regulation? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Has your pilot certificate ever been suspended or revoked? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Have you ever been convicted of a felony or are you under indictment for a felony? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Have you ever been convicted of driving a motor vehicle under the influence of alcohol or narcotics, or of reckless driving? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Has your drivers license ever been suspended or revoked? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7. Have you ever been convicted of or are you under indictment in a legal action involving drugs or narcotics? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 8. Have you ever had or been treated for a chemical dependency? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 9. Are you regularly using any medication? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Explain fully each "Yes" answer _____

USE EXTRA PAGE TO FULLY EXPLAIN

ALL OF THE INFORMATION HEREIN IS TRUE & CORRECT TO THE BEST OF MY KNOWLEDGE AND I HAVE NOT KNOWINGLY OR INTENTIONALLY CONCEALED OR MISREPRESENTED ANY FACT. THIS FORM WILL BECOME PART OF THE INSURANCE APPLICATION AND AS SUCH ALL FRAUD STATEMENTS ARE APPLICABLE.

X _____
PILOTS SIGNATURE _____
TODAY'S DATE

Producer _____

Address _____ City _____ State _____ Zip _____

Telephone No. _____ Fax No. _____

Aircraft Rental Agreement

In consideration of the rental fees paid and the covenants contained herein, The Cub Club, Inc. dba Fort Myers Flying Club ("Club") agrees to lease its aircraft to the renter identified on the signature line ("Renter") in accordance with Club Rules and Regulations in effect from time to time.

The following obligations and covenants apply to all rentals of Club aircraft at any time after the date of this agreement.

1. Renter Obligations

- a. Renter acknowledges that he or she has inspected the aircraft and has found it to be in good mechanical condition and airworthy prior to flight. The Club is NOT responsible to determine air-worthiness of the aircraft.
- b. Renter agrees to pay the Club time and fuel charges and abide by all Club rules and regulations in effect at the time of flight, and pay any fines in effect for violation of such rules.
- c. Renter agrees that the aircraft shall not be used for any illegal purposes; or in any race, speed test, or contest; or by any person other than the renter who signed this agreement; or to carry passengers or property for compensation or hire; or for any flight which the Renter is not properly rated or certified; or for any purpose or use prohibited by the Fort Myers Flying Club; or for any purpose or use not specifically authorized by the Club.
- d. Renter will fully comply with FAA, airport and Club rules and regulations, and any limitations in insurance policies affecting use of the aircraft. It is the Renter's obligation to become familiar with such matters.
- e. Renter expressly acknowledges personal liability for expenses not covered by Club insurance, including any deductible required by the club's insurance policy, of any loss or damage to the aircraft, its components, parts or equipment during the period Renter possesses the aircraft; and potential liability for additional expenses associated with damage to the aircraft, other property, and their persons and other persons including passengers; and for other assessments that might be levied by Club in accordance with its rules and regulations.

2. Representations

- a. Club represents and warrants to Renter that it has the full power and authority to enter into this Agreement. This Agreement has been duly authorized, executed and delivered by Club and is legal, binding and enforceable in accordance with its terms.

3. Notice of Insurance Coverage

- a. Club is insured for liability due to an accident up to \$1,000,000.00 combined for bodily injury liability and property damage (with certain sub-limits); and for the full value of the aircraft, less certain deductibles. The Club does not provide insurance coverage benefiting the renter, passengers or personal items. The Club recommends that Renter acquire insurance to cover Renter's liabilities.

Aircraft Rental Agreement

4. Liability Limits

- a. The Club's maximum liability to Renter and Renter's passengers arising out of maintaining, leasing and otherwise making aircraft available to renter, whether based upon warranty, contract, tort or otherwise, shall not exceed the fees paid by renter for the applicable period.

5. Indemnification

- a. Renter agrees to release, indemnify, and hold Club, its members and officers harmless from and against all liabilities, damages, delays, losses, claims and judgments of any kind whatsoever, including all costs, attorney's fees, and expenses incidental thereto, including personal injury, death or property damage claims, arising or in any manner occasioned by the operation or use of the Aircraft during the time period Renter possesses the Aircraft.

6. Updates to Rental Agreement

- a. This agreement may be updated from time to time. Updates will be approved by Club's Board of Directors, and Club's membership will be advised. Renter agrees to be bound by the rental agreement in force at the time of rental.

In witness whereof, the Parties hereto have signed this Agreement.

Renter:

Signature: _____

Printed Name: _____

Date: _____

The Cub Club, Inc. dba The Fort Myers Flying Club

Signature: _____

Printed Name: _____

Title: _____

Date: _____

CHECKLIST FOR THE FORT MYERS FLYING CLUB MEMBERSHIP APPLICATION

- COMPLETE APPLICATION**
- HAVE SPONSOR SIGN THE APPLICATION (Optional)**
- COPY OF CURRENT MEDICAL**
- COPY OF LAST BIENNIAL FLIGHT REVIEW OR
WINGS PROGRAM ENDORSEMENT (If applicable)**
- COPY OF PILOT CERTIFICATE
(NOTE: IF YOU ARE A STUDENT,
THIS IS YOUR MEDICAL.)**
- PERSONAL CHECK PAYABLE TO:
“Fort Myers Flying Club, Inc.”
PILOTS: \$400.00, STUDENTS: \$300.00 INITIATION FEE**
- COMPLETED PILOT QUALIFICATIONS FORM
(Named Insured: Fort Myers Flying Club)**
- SIGNED CLUB AIRCRAFT RENTAL AGREEMENT**

**IF YOU HAVE ANY FURTHER QUESTIONS,
CONTACT THE MEMBERSHIP CHAIRPERSON OR
YOUR SPONSOR**

- MAIL APPLICATION TO:**

**Johnny Dorning
Fort Myers Flying Club
605 Danley Dr # 10
Fort Myers, FL 33907**

**Or scan and email to:
membership@fortmyersflyingclub.com**