



COPA FLIGHT 177 Membership Registration Form

Name: _____

Address: _____

Email Address: _____

Phone Numbers: _____ Home Cell Work

_____ Home Cell Work

Membership Type: Full Membership \$30 Associate Member \$20
 Youth Membership \$15

Aircraft Owner? Registration _____ Type _____

COPA National Member: Yes, Number: _____ No

Your comments or special notes: _____

Please note:

- Full membership is required to vote at meetings and serve on the executive.
- The membership year is from May 1st to April 30th.
- The Youth Membership is for young folks 12 to 17 years, inclusive.

Complete the form and send it along with a cheque or e-Transfer to:

Mailing Address

Mike Ash, Treasurer
9612 Joanne Ave.
Grand Bend ON N0M 1T0

e-Transfer

c.fnbo.mja@gmail.com

OR Hand in this form and cash or cheque at a meeting to any one of the executive.

Thank you.