

# New Member Application

## UTAH SOARING ASSOCIATION

782 So Shadow Rock Court Heber, UT 84032

(Complete application, please type or print, and mail to address above)

I hereby apply for \_\_\_\_\_ membership in the Utah Soaring Association: (active, associate, family, or instructor)

Name: \_\_\_\_\_

Address: Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: Home \_\_\_\_\_ Work: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Birth date: \_\_\_\_\_ Email: \_\_\_\_\_

Glider flight experience to date:

_____ Dual Student Pilot Glider	No. dual flights with instructor: _____	Instructor's name: _____
_____ Solo Student Pilot Glider	No. solo flights _____	Glider Type _____
_____ Private Pilot Glider	Certificate No. _____	No. Flights: _____ No. Hours _____
_____ Commercial Pilot Glider	Certificate No. _____	No. Flights: _____ No. Hours _____

Types of gliders flown as pilot-in-command: \_\_\_\_\_

No. glider flights in last 12 months: \_\_\_\_\_ No. glider hours in last 12 months \_\_\_\_\_

Flight school where glider rating was earned: \_\_\_\_\_

Other flight experience and ratings: \_\_\_\_\_

Have you ever been involved as pilot-in-command in an aircraft mishap resulting in \$500 or more damage? \_\_\_\_\_

If above question was answered yes use the reverse side of this application to explain the situation and outcome.

**If accepted into membership by the Utah Soaring Association I agree to accept and comply with the following conditions as well as those outlined in the Assoc Flight Rules and Bylaws:**

1. I certify that I have read and agree to comply with the Bylaws and Flight Operations Rules of the Utah Soaring Assn. Found on the association's web pages. [www.utahsoaring.org](http://www.utahsoaring.org)
2. I understand that the Utah Soaring Association is a not-for-profit corporation. The business of the Association is conducted by volunteers
3. Instructor members pay no dues and will only fly club gliders while instructing a club member.
4. Membership in the Soaring Society of America is also required by our insurance company & the club. SSA # \_\_\_\_\_  
If not currently a member of the SSA \$64.00 us also due upon acceptance of your application
5. Upon approval of this application I will submit a membership initiation fee in the amount of \$425.00.
6. I will pay monthly dues in the amount of \$50.00 as an active member or \$115.00 per year as an associate member with reduced flying privileges. First month's dues are due at the time the initiation fee is due. Initial amount to be paid upon acceptance is \$475.00 for Active Members which is the initiation fee and the first month's dues and \$540.00 for Associate members plus \$64 for membership in the Soaring Society of America if applicable.
  - a. The amount of dues may be raised or reduced as necessary to meet Association expenses.
  - b. Members whose dues are delinquent may not fly Association aircraft.
  - c. A member who becomes three months delinquent in dues forfeits membership and will be terminated unless special arrangements are made in writing with the Board of Directors.
7. I am aware that there are risks and hazards incurred in the operation of gliders and that unanticipated dangers may arise during such activity. I assume all risks of injury to myself and my property as well as risk of injury to my passengers, family and guests, that may occur in connection with the operation of Association owned gliders and associated activities. For myself, my heirs, administrators and assigns I hereby release, remise and discharge the Utah Soaring Association and its respective members, agents, officers, officials and all other participants in the operation of Association owned gliders and associated activities of all and from all claims, demands, actions and causes of action of any sort for injuries sustained to person and/or property as well as to my family and guests during participation in the activities of the Utah Soaring Association due to negligence or any other fault.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Sponsoring Member: Name: \_\_\_\_\_ Signature: \_\_\_\_\_

(Following space for use by Utah Soaring Association)

Application received by: \_\_\_\_\_ Date: \_\_\_\_\_

Action by Board of Directors: Membership approved: \_\_\_\_\_ Rejected: \_\_\_\_\_ Date: \_\_\_\_\_

President: \_\_\_\_\_ Vice President: \_\_\_\_\_

Secretary: \_\_\_\_\_ Treasurer: \_\_\_\_\_

Maintenance Officer \_\_\_\_\_ Safety and Flight Operations: \_\_\_\_\_

**USA application 01/01/2010**