

Bendigo Flying Club Inc. Affiliate Member Form
Sept. 1st 2009 – Aug. 31st 2010

The Secretary, Bendigo Flying Club
P.O Box 546, Bendigo. 3552
PH/Fax 03 5443 8395

Date:...../...../.....

I, the undersigned, desire to join / rejoin as a Affiliate Member of the Bendigo Flying Club and enclose \$ 20.00 as my subscription for the financial year ending 31st August, 2010

APPLICANTS FULL NAME:
Christian Name Surname

DATE OF BIRTH...../...../..... Partners Name.....

ADDRESS:

Occupation..... Home Phone.....

Work Phone..... Fax.....

E-Mail:..... Mobile.....

Please ensure the following information is completed (For Insurance)

Pilot Licence No RAA:

Date Of RAA Licence Expiry:/...../20

Date Of GA. AFR Expiry:/...../20

Date Of Aviation Medical Expiry:/...../20

Signature Of Applicant :

INDEMNITY

In consideration of my being elected as a member of the Bendigo Flying Club, I hereby agree that before flying in any club aircraft I will ensure that I am current on type, a full financial member and hold a current BFR as well as a current aviation medical, and are a current member of the RAA , if required. I also agree to make myself acquainted with the Memorandum & Articles of Association, and any other Club By-laws and Regulations. I further agree to observe, perform and be governed by the same, amendments thereof or additions thereto which may be hereinafter made.

I also hereby exonerate and agree to indemnify the Bendigo Flying Club and/or its associated legal entities, its members, their agents and their servants from and against all liabilities for any damage or injury sustained by me in the course of or in connection with any flight in any aircraft owned or controlled by the Club, or for any damage or injury sustained by any person other than a member of the club, carried in any aircraft hired by me from the Club, in the course of or in connection with any flight in such aircraft.

Signature of Applicant: