



Canadian Historical Aircraft Association Membership Application

Name: _____

Address: _____

City, Province: _____

Postal Code: _____

Phone: _____

Email: _____

Type of Membership: _____

- | | |
|------------|---------------|
| 1) Regular | \$35 Annually |
| 2) Family | \$60 Annually |
| 3) Student | \$25 Annually |

Volunteering

Are you interested in volunteering? YES (a volunteer application form will be sent to you)
(Please circle one)

NO

Please check off interest:

Lancaster Restoration Group: _____

Mosquito Restoration Group: _____

Flight Operations: _____

Archives: _____

Other: _____

Signature:

Date:

I agree to abide by the terms and conditions of membership in the association as prescribed in the rules, regulations and code of conduct of the bylaws.

The Canadian Historical Aircraft Association collects member information for its sole use in accordance with the Freedom of Information and Privacy Act of Ontario. No member information will be sold or released without the explicit consent of the member.

(Please make cheque payable to Canadian Historical Aircraft Association)

104-2600 Airport Road, Windsor, Ontario, N8V 1A1

Office Use Only

Date Rec'd _____ Amount Rec'd _____ Cheque # _____ Card Issued _____