

PILOT DATA & MEMBERSHIP APPLICATION

The Joe Whitford inc. membership year begins April 1st. and ends March 31st.
Membership is subject to board approval.

Annual Membership Dues: Renewal \$80.00
New Member: \$80.00 plus \$40.00 for onetime non-renewable background check
Todays date: ___/___/___ Paid by: Check ___
Cash ___

Personal Information

Last name: (Print) First name: Mi:
Address: City: State: ZIP:
Home Phone Cell E-Mail Address (Required)
() ()
Signature (Do not print.)

FAA Certificated & Ratings

Ratings: AIRPLANE__ INSTRUMENT__ GLIDER__ HELICOPTER__
Check GYROPLANE__ A&P__ IA__ SEL__
all that SEAPLANE__ BALLOON__ ROTARY__ MEL__
Apply MES__ OTHER__ Total flight time:___Hrs.
LOGGED HOURS IN: PIPER J3__ TAYLORCRAFT BC-12D __
FAA Ratings:_____

BIANNUAL FLIGHT REVIEW & MEDICAL INFORMATION

DATE OF LAST BI-ANNUAL___/___/___ (PLEASE ANSWER ALL QUESTIONS!)
I am a student: Y N or I have been a pilot less than 2 years: Y N
Note: You cannot fly as Pilot-in-Command of a JWI aircraft until you have completed
a Bi-Annual Flight Review and have a current medical !

Medical Certificate Exam date: ___/___/___ First Class__ Second Class__ Third Class__ Student__
Sport pilot_ requires_3rd. class_or Current/Valid drivers Lic.__
Do you have an official denial or revocation of medical eligibility on file with the FAA. Y N.

Insurance Information

Renters or aircraft owners insurance Y__ N__ WITHIN THE LAST 12 MONTHS HAS YOUR PILOTS OR
Coverage: Liability__ Hull__ DRIVERS LICENSE BEEN SURRENDERED OR REVOKED
Insurance Company: Avemco__ AOPA__ OR HAVE YOU BEEN ARRESTED FOR OR CHARGED WITH
Other: OPERATING AN AIRCRAFT OR MOTOR VEHICLE WHILE
UNDER THE INFLUENCE OF DRUGS OR ALCOHOL? Y__N__

Mail completed form and check to: JWI, Chris Hansen, 5588 Irish Ridge Road,
Durhamville, NY 13054