

SILVER WINGS FRATERNITY

A Fraternal & Educational Not-for-Profit Organization of Pilots who Soloed More Than 25 Years Ago, Newer Pilots, and Others with an Interest in Aviation

Date _____

National Membership Application

**For NEW Members, Member Renewals
and UPDATING Member Information**

(All information provided remains internal and is not shared outside SWF)



New Member (Circle One) **Member Update**

Names: Last _____ First _____ Middle _____ Title ____ DoB (MM-DD-201Y) ____/____/____

SWF Member Number _____ (Assigned by National or Write Pending) Date Joined National SWF ____/____/____

Chapter Member? YES or NO Chapter Name (If Applicable): _____ Are you an Officer? Title _____

Permanent Mailing Address (Home or Post Office Box) _____

City/Municipality _____ State/Province _____ Zip/Postal Code _____

Telephones: Home _____ Cell _____ Alternate _____

Email Address (For Official Communications and To Receive Timely Updates) _____

How Do You Wish to Receive the **SLIPSTREAM** Quarterly Newsletter? (please circle one) **Mail** (Paper Copy) **Email** (PDF) **Both**

Spouse/Partner Name _____ May Attend Most Meetings and Events With Member.

Emergency Contact Name and Telephone (If not Spouse/Partner) _____

First Solo in Powered Aircraft (if Applicable): Full Date ____/____/____ Location _____ State ____

Make & Model of First Aircraft Soloed _____ (Attach or Mail a Copy of Logbook Page or Other Doc, if Applicable)

Military Service Branch (Whether or Not Flying) _____ Status (Active, Retired, Veteran) _____

Please **Check One** of the Two Boxes Below. Heard About, Sponsored or Invited By: _____

New Member

Annual Renewal

(Life memberships are not offered)

Rev. Dec 2016

SILVER WINGS FRATERNITY AVIATION SCHOLARSHIP FOUNDATION, INC.

~ National Annual Membership Dues ~

Active Member Renewal (Due 1 Jan each year) \$30.00 USD/yr

New Member - Join in:	Jan thru Mar	\$30.00	USD
	Apr thru Jun	\$25.00	USD
	Jul thru Sept	\$20.00	USD
	Oct thru Dec	\$15.00	USD

Pay by **Credit Card** or Make Your **Check** or **Money Order** Payable to

"Silver Wings Fraternity" (Do Not Send Cash) and Mail to:

SWF Membership Secretary, P. O. Box 1694, Oldsmar, FL 34677-1694

Circle your **Credit Card** and provide information:



Card No. _____ - _____ - _____ - _____

Exp. Date ____/____/____ 3 or 4 Digit number in signature block. _____

