

Gila and Salt River Base and Meridian Hot Air Balloon and Airship Social Society, Inc.

Membership Application Gila & Salt River Base & Meridian Hot Air Balloon & Airship Ascension Social Society, Inc.

Thank You Very Much for Your Support!

Annual Membership Type: Individual ___ (Dues \$30) or Household ___ (Dues \$35)

Awarded Honorary Membership ___ Awarded Life Membership ___

Individual Information Please Fill in All Spaces!

First Name: _____ Last Name: _____

Address: _____ Unit/Apt#: _____

City: _____ State or Country: _____ Zip Code: _____

Contact Me At - Mobile: _____ Home: _____

Work: _____ FAX: _____

Email Address: _____

My Birth Date is - Month: _____ Day: _____

I am a - Crew Person: ___ BFA Member: ___ BFA Crew Rating: _____ Private Pilot: ___

Wings Participant: ___ Commercial Pilot ___

Which of the following committee(s) will you volunteer to help with?

Calling ___ Community Relations ___ Competition ___ Membership ___ Newsletter ___

Picnics/Social ___ Raffle ___

Household Information**- Complete for Members of the Household

** List other members of the household and their information on the back.

First Name: _____ Last Name: _____

Address: _____ Unit/Apt#: _____

City: _____ State or Country: _____ Zip Code: _____

Contact Me At - Mobile: _____ Home: _____

Work: _____ FAX: _____

Email Address: _____

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Return Application with Membership Dues (Checks payable to Arizona Balloon Club C/
O Membership Chair **Sandy Osborne**, 3929 W. Palo Verde Dr., Phoenix, AZ 85019,
Email: sandyosborne@cox.net

Additional Household Member Information- Complete for Members of the Household

First Name: _____ Last Name: _____

Address: _____ Unit/Apt#: _____

City: _____ State or Country: _____ Zip Code: _____

Contact Me At - Mobile: _____ Home: _____

Work: _____ FAX: _____

Email Address: _____

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