

CINCINNATI SILENT FLYERS MEMBERSHIP FORM
(ALSO USED FOR NEW MEMBER APPLICATIONS)

NAME: _____

ADDRESS: _____

TELEPHONE NUMBERS

HOME: _____ CELL: _____

EMAIL: _____

DATE OF BIRTH: _____ (OPTIONAL)

AMA Membership Number: _____

(Required for CSF membership)

Current Membership paid through (year)? _____

Years of RC Flying Experience? _____

HOW DID YOU FIND OUT ABOUT THE CSF? _____

CURRENT RADIO FREQUENCIES?

Examples:

JR 6102 _____

Spektrum _____

Radio _____

31
2.4GHz
Frequency/ Channel

COMMENTS: _____

Note:

Please fill out and mail, along with your dues, to:

Kevin Krieg
5566 Oakvista Drive
Madeira, OH 45227