



2011 AMA National Championships
AMA International Aeromodeling Center, Muncie, IN
July 9, 2012 – August 13, 2012

| | |
|-------------------|-------|
| <i>AMA HQ USE</i> | |
| Type | _____ |
| Amount | _____ |
| Date | _____ |
| Entered by | _____ |

| | | |
|-------------------------------------|-------------|-----------|
| <u>Volunteer Information</u> | | |
| Date of Birth _____ | AMA # _____ | |
| Name _____ | | |
| Address _____ | | |
| City _____ | State _____ | Zip _____ |
| Tel _____ | | |
| E-Mail _____ | | |

I would like to volunteer for the following event(s):

- | | |
|---|--|
| <input type="checkbox"/> AMA Manpower | <input type="checkbox"/> RC Electric |
| <input type="checkbox"/> Indoor Free Flight | <input type="checkbox"/> Pylon |
| <input type="checkbox"/> Scale Aerobatics | <input type="checkbox"/> CL Aerobatics |
| <input type="checkbox"/> Control Line General | <input type="checkbox"/> Outdoor Free Flight |
| <input type="checkbox"/> Pattern | <input type="checkbox"/> Scale |
| <input type="checkbox"/> RC Combat | <input type="checkbox"/> Helicopter |
| <input type="checkbox"/> Soaring | |

Event Director Signature _____

Specific events (if known) _____

Date(s) Available _____

Note: *Volunteers' names will be given to the appropriate Special Interest Group. No AMA membership credit will be given. Any compensation, if offered, is the responsibility of that Special Interest Group.*

In case of Emergency please contact:

Name _____ Day Phone _____ Relationship _____

Address _____ City _____ State _____ Zip _____

Send completed form to AMA Headquarters, 5161 E Memorial Dr., Muncie IN 47302 Attn: Nats Entries