ACADEMY OF MODEL AERONAUTICS

Life Member Enrollment

Please type or print the information clearly in CAPITAL letters. When completed, this form can be mailed with payment to: AMA, 5161 E. Memorial Dr., Muncie, IN 47302-9252
Fax: (765) 741-0057 Toll-free: (800) 435-9262 Ext.129

First Name ___________________________ Initial _______ Last Name____________________________
Mailing Address (number and street) _______________________________________________________
City _________________________________ State ____________
ZIP Code _____________________________
Home Telephone ( ____ ) _______________ Work ( ____ ) ________________
Fax ( ____ ) _________________________
Email _______________________________________________________________________________
New Member ___ Renewal ___ (give AMA number if known) _______________________________

As a contributing member of the Academy of Model Aeronautics, you advance the purpose of AMA by financially supporting AMA programs.

Payment for Life membership may be made in full at the time of request ($1,500) or a payment plan which requires a down payment of $375 and minimum payments of $375 in each of the next three (3) years, is available. Invoices will be sent out for the three annual payments in July of each year. The invoices are due and payable by August 31 of that year.

Amount Received $ ___________________  Check ____  Mastercard ____  VISA ____ Discover ____
Exp. Date ____ ____ / ____ ____

Cardholder’s signature __________________________________________________________________

Your Life membership provides automatic annual renewal of AMA membership which includes:

• AMA publication services
• Permanent metal license card
• Continuing recognition of your contribution through issuance of special “L” AMA number. Example: L330

AMA
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