



Springfield Radio Control Club Springfield, Missouri

Name: _____

Name of significant other: _____ (Optional)

Mailing Address: _____

City: _____

State: _____

Zip: _____

Telephone: _____

Office or Cell: _____ (Optional)

Radio Frequencies You Will Broadcast On: _____

E-Mail Address: _____

AMA Membership Number: _____

Note: Proof of membership in the AMA is required for membership in the Blacksheep Squadron.

All members are required to complete and sign this form. Mail a copy of your AMA card along with this form and a check payable to SPRINGFIELD R/C CLUB to:

Russ Rhodes, Treasurer
2172 S. Forrest Heights
Springfield, MO 65809

Phone: 417-889-8655
Email: RussellGRhodes@MissouriState.edu

By paying my dues, I agree to follow the club rules as well as the AMA published rules.

Signature

Date