

# SUFFOLK AERO MODELERS



VDJ

## PLEASE READ FIRST

*Please fill out this form directly on your computer then submit it. You also have the option of printing it out then mailing it to us. We need all the information filled in so that we can keep accurate records. One application and permit per person.*

*Your E-Mail address is very important. Necessary Information pertinent to the club such as field closings, events, or cancellation of any function may be sent to you using your E-mail address. Those who do not use computers will be contacted either by phone or mail.*

*Every SAM member must be a member of the AMA. You do not have to send a copy of your new AMA card since verification of your membership is done by the club. Only type your AMA number on the permit form, not on the application. At the bottom of the permit request there are two spaces marked permit number and date issued. DO NOT fill these in; they are for the permit office use only.*

*If you are going to mail in your application and permit request, please enclose a self addressed stamped envelope with your remittance. Your permit and SAM membership badge will be mailed back or handed to you as quickly as the permit office returns them. Any member who does not include a stamped self addressed envelope with his or her application will be charged a \$1.00 fee.*

*Make all checks or money orders payable to the Suffolk Aero Modelers. Cash will be accepted by a club officer at a club meeting only. Suffolk Aero Modelers meetings are held on the 2nd Wednesday of each month (See "Event Calendar" on our web site @ [www.suffolkaeromodelers.org](http://www.suffolkaeromodelers.org)) at the Brookwood Hall Senior Center, 50 Irish Lane, East Islip. Send all renewals by mail to the address listed below.*

**Suffolk Aero Modelers**  
**Karen Johnson**  
**49 Ridgeway Blvd.**  
**Bay Shore, New York**  
**11706**

If you have any questions or need further assistance please feel free to contact Victor Dejesus at (631)236-9001 between the hours of 10:00am and 8:00pm. You can also send an email to [newsletter@suffolkaeromodelers.org](mailto:newsletter@suffolkaeromodelers.org).

**Thank You**

# SUFFOLK AERO MODELERS



## *Serving the Hobby through Fun and Fellowship* MEMBERSHIP APPLICATION

Please print clearly all information in blue or black ink, one individual per application

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Initial \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Primary Phone # \_\_\_\_\_ Other Phone# \_\_\_\_\_

E-Mail Address \_\_\_\_\_

**IN CASE OF AN EMERGENCY WHO SHOULD BE NOTIFIED?**

Name \_\_\_\_\_ Phone # \_\_\_\_\_ Relationship \_\_\_\_\_

**Type of Membership**

Renewal    New Member    Each new member is required to pay a small one time Initiation fee of \$50.00 per open membership.

Junior Membership, Under 18 years of age: \$25.00 plus \$ 40.00 Park perm it fee.

Open membership:                      \$50.00 plus \$40.00 Park permit fee.

Honorary members and officers:        \$40.00 Park permit fee.

No-fly membership:                      \$35.00 club fee.

Date of Birth: \_\_\_\_\_

I the undersigned have read and understand the rules and regulations set forth in both the L.I. State Park and Suffolk Aero Modelers field rules for field number 9 as revised in April of 2003. I agree to follow the rules, principles and guides set forth therein. I also understand that if my actions are found not to be in accordance with the principles set forth in this document my membership in the Suffolk Aero Modelers may be terminated.

I am aware that R/C model flying may present hazards to participants and spectators. I exempt, waive and relieve the Suffolk Aero Modelers, Incorporated (SAM) from all current or future liability for personal injury, property damage, or wrongful death caused by negligence.

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent or Guardian of Applicant under 18 must also sign** \_\_\_\_\_

*Do not fill in below this line. For office use only.*

AMA membership number \_\_\_\_\_

Membership Fee \$ \_\_\_\_\_

**Membership:** *Open    Honorary    Junior    No-fly*

Permit Fee                      \$ \_\_\_\_\_

**Rating:** *Pilot    Student    Instructor    Officer/Honorary*

Initiation Fee                      \$ \_\_\_\_\_

L. I. S. P. Permit number \_\_\_\_\_

Surcharge                      \$ \_\_\_\_\_

Cash            Check# \_\_\_\_\_

Total                      \$ \_\_\_\_\_

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*Serving the Hobby through Fun and Fellowship*

[www.suffolkaeromodelers.org](http://www.suffolkaeromodelers.org)

NYSOPRHP Permit Department  
Long Island Region - Belmont State Park  
P.O. Box 247  
Babylon, New York 11702-0247  
December 24, 2007

To whom it may concern:

I am applying for a permit to fly R/C model airplanes at Heckscher State Park. I am a member in good standing with the Suffolk Aero Modelers and the Academy of Model Aeronautics.

The Suffolk Aero Modelers have the required insurance as stated in Section #5 of the NYSOPRHP-Long Island Region rules and regulations for R/C model airplane flying at field #9 at Heckscher State Park.

I have paid the Suffolk Aero Modelers the sum of \$40.00 who will then forward to your office along with this request for a permit to fly R/C model airplanes at Heckscher State Park.

Thank you in advance for your consideration in this matter.  
I remain,

\_\_\_\_\_  
SIGN NAME

\_\_\_\_\_  
AMA MEMBER NUMBER

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
DATE OF REQUEST

\_\_\_\_\_  
STREET ADDRESS

\_\_\_\_\_  
TOWN

\_\_\_\_\_  
STATE

\_\_\_\_\_  
ZIP CODE

DO NOT WRITE BELOW THIS LINE FOR PERMIT OFFICE USE ONLY

\_\_\_\_\_  
PERMIT NUMBER

\_\_\_\_\_  
DATE ISSUED