



Membership Application

500 Westover Dr. #2384
Sanford, NC 273301923
Phone: 866-37-USPPA (866-378-7772) | Fax: 866.226-2990
email: theUSPPA@gmail.com | web: www.usppa.org

Membership includes 1 year of *Powered Sport Flying Magazine*, access to the Members portion of our website, access to the training program and, of course, a voice in the organization's future. You will also be eligible for the training reimbursement program, one method we use to encourage thorough instruction.

sought then the granting instructor must fill out the rating section. All ratings must go through the USPPA syllabus.

No individual information will be offered to third parties however, group data may be used for various reasons such as insurance and tabulating statistics.

Please fill out the application completely then read, sign and initial the appropriate places on the waiver. If a rating is being

If this is for a rating application the waiver must be signed for the application to be processed.

1 General Data

New Renewal USPPA# for Renewal or Rating: _____

Name _____ Date: ____ / ____ / ____

Street Address: _____

City _____ State: ____ Zip code: _____

Country: _____ Email: _____

Telephone _____(hm), _____(wk), _____(other),

Membership Type: Full (\$34) ____ School (\$39) ____ Lifer (\$450) ____

2 Demographics

Birthdate: _____ Solo Date: _____ Male/Female: ____ Pilot Ratings: _____

How did you hear about USPPA? _____

Motor(s) owned _____ Wings(s) owned _____

Occupation: _____ Use helmet? Y/N ____ Use Reserve? (Y/N) ____

Paid Amt \$ _____ For _____

USPPA Rep: _____

Receipt: \$ _____ Paid to USPPA for _____,

Accepted by _____ on (date) _____