



## Personal Information

Name: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

Primary Email: \_\_\_\_\_ Secondary Email: \_\_\_\_\_

Home Address: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State: \_\_\_\_ Expiry Date: \_\_\_\_\_

Citizenship: \_\_\_\_\_ How did you find out about DPC? \_\_\_\_\_

## Emergency Contacts

Name	Phone	Relationship
_____	_____	_____
_____	_____	_____

## Employment Information

Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

## Pilot Qualifications

Certificate type: \_\_\_\_\_

Certificate #: \_\_\_\_\_

Ratings: \_\_\_\_\_

Endorsements: \_\_\_\_\_

Medical Class: \_\_\_\_\_

Date of Medical Exam: \_\_\_\_\_

Medical Expiry: \_\_\_\_\_

Medical Restrictions: \_\_\_\_\_

BasicMed Course Date: \_\_\_\_\_

Total PIC time: \_\_\_\_\_

Total complex time: \_\_\_\_\_

Date of last flight: \_\_\_\_\_

Flight review date: \_\_\_\_\_

In consideration of my member in and aircraft made available to me by Dayton Pilot's Club, I agree that on all flights in Club aircraft as follows:

1. I shall abide by the Club Operating Rule and any future revisions thereto. Failure to do so will be grounds for expulsion.
2. I shall observe and comply with all Federal, State and Local air regulations and manufacturer's operating procedures.
3. I shall allow no one else to fly the aircraft.
4. I shall fly Club aircraft without an instructor only when I meet all FAA and Club medical, currency and Safety Meeting requirements.
5. I shall return the aircraft to the Club's place of business at the agreed time, weather permitting, in the same condition I received it, normal wear and tear excepted.
6. I shall report all accidents and damage to such aircraft, whether major or minor, to the Club at once, together with the names and addresses of witnesses and all involved parties, and will not move the aircraft unless expressly authorized to do so by an officer of the Club or unless ordered to do so by the FAA.
7. I shall indemnify and hold the Club harmless for any and all loss, damages, including insurance deductible, and attorney's fees resulting from my operation to Club aircraft.
8. I shall pay all bills based upon Club rates currently in effect, and any future modifications thereof.
9. I shall be responsible for any damage up to the insurance deductible while operating or attempting to operate Club aircraft, except in the case of routine mechanical problems or failures.
10. I shall comply with and be bound by: the club Flight and Operating Rules, Constitution and Bylaws, and the terms of this agreement until my membership in the Club terminates.
11. I shall notify the Club in writing upon wishing to terminate my membership.

By my signature, I verify that all information on my application form is true and correct. I acknowledge receiving a copy of this membership agreement.

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Submit this application plus copies of your driver's license, pilot's certificate, medical certificate, and proof of citizenship to the Membership Chair**  
[membership@daytonpilotsclub.org](mailto:membership@daytonpilotsclub.org)