



# WCRCAF

## WCRCAF 2020 MEMBERSHIP APPLICATION FORM

RENEWAL \_\_\_\_\_ NEW MEMBER \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

### WCRCAF MEMBERSHIP FEES FOR 2020 ARE AS FOLLOWS...

Open Member Renewal and New Members	\$75.00	
Junior Members, New or Renewal	\$50.00	TOTAL PAYABLE FEES _____ -
Associate Member (non flying member)	\$25.00	

CHEQUE \_\_\_\_\_ CASH \_\_\_\_\_ eTRANSFER \_\_\_\_\_ (e-mail [treasurer@WCRCAF.com](mailto:treasurer@WCRCAF.com) for e-Transfer instructions)

### Make Cheques Payable to WCRCAF

Surname: \_\_\_\_\_ Given Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

M.A.A.C. #: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_ Frequencies: \_\_\_\_\_

**Note: Please attach a photocopy of your MAAC Card to the Membership Application form. The WCRCAF Club Card will only be mailed to the member when all information has been collected (including the photocopy of the MAAC Card).**

Permission to add your E-Mail address to club contact list YES \_\_\_\_\_ NO \_\_\_\_\_ ( so you can receive club notifications)

Area of Interest (sport/electric/heli/fpv/multirotor etc) \_\_\_\_\_

Do you require the assistance of an instructor? \_\_\_\_\_

**Wings Proficiency Level A B C D / Blades Proficiency Level A B C D E** (circle highest obtained)

Are you willing to volunteer as a member of a committee or in any other way? \_\_\_\_\_

### WAIVER OF LIABILITY

I hereby acknowledge and agree that, as a member of the West Coast Radio Control Aircraft Flyers Society, I use the property and facilities under the control of or used by the Society at my own risk and hereby hold blameless the Society, its directors, its officers and the owners of any such property or facilities from any suit, cause, action or claim resulting from my use of such property or facilities.

I further agree to hold blameless the Society, its directors, its officers and its instructors in the event of any accident involving damage to or loss of models or property, personal injury or loss of life resulting from the operation of my model aircraft regardless of whether said aircraft was under the control of myself or an instructor at the time of the accident.

The Society acknowledges that this waiver in no way affects the applicant's rights or benefits under any insurance coverage provided by the Model Aeronautics Association of Canada or other insurer.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### DUES ARE PAYABLE ON OR BEFORE JANUARY 1ST OF EACH YEAR

Mail payment, proof of MAAC along with this Application to -  
W.C.R.C.A.F., c/o Scott Thomas 14834 88A Avenue Surrey B.C. V3R7T3