

**APPENDIX B: Membership Application**

**Application for Membership  
IPMS/Wright Field Scale Modelers**

**Dues Paid:**

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**First join date:** \_\_\_\_\_ **IPMS/USA #** \_\_\_\_\_ *(if IPMS/USA member)*

**Applicant name:** \_\_\_\_\_ **DOB:** \_\_\_/\_\_\_/\_\_\_

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

**City:** \_\_\_\_\_ **State & Zip code:** \_\_\_\_\_

**Home Phone:** (\_\_\_\_) \_\_\_\_\_ - **Work Phone:** (\_\_\_\_) \_\_\_\_\_ - **Mobile Phone:** (\_\_\_\_) \_\_\_\_\_ -

**Email:** \_\_\_\_\_

*Note: Please provide an email address so we can email you and keep in contact to quickly notify of news and changes in the club schedule.*

**Spouse:** \_\_\_\_\_

**Children:** \_\_\_\_\_

**Modeling interests:**            1/72            1/48            1/35            1/32            1/24            other

<b>Aircraft</b>						
<b>Armor</b>						
<b>Auto</b>						
<b>Sci-Fi Fantasy</b>						
<b>Maritime</b>						
<b>Other</b>						

*By signing below the applicant acknowledges and agrees to the IPMSWF by-laws and terms of Membership and approves realignment of his/her IPMS/USA membership to IPMS/Wright Field Scale Modelers.*

**Applicant signature:** \_\_\_\_\_

**IPMS/Wright Field Scale Modelers Dues Receipt**

**Member Name:** \_\_\_\_\_ **Due Paid: \$** \_\_\_\_\_ **Date Paid:** \_\_\_\_\_

**Approval IPMS RC Treasurer:** \_\_\_\_\_ **Date:** \_\_\_\_\_