

# WACO Membership Application

Thank you for your interest in becoming a member.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Academy of Model Aeronautics Number \_\_\_\_\_  
(if applicable for R/C Flying)

Membership Level: One Year Memberships

\_\_\_\_\_ Student \$10.00          \_\_\_\_\_ Supporter \$100.00

\_\_\_\_\_ Individual \$20.00          \_\_\_\_\_ Contributor \$250.00

\_\_\_\_\_ Family \$25.00          \_\_\_\_\_ Benefactor \$500.00

\_\_\_\_\_ Partner \$50.00          \_\_\_\_\_ Corporate \$1,000.00

\_\_\_\_\_ Please contact me about meetings.

\_\_\_\_\_ Please contact me about children/family events

\_\_\_\_\_ Please send me details on volunteering

\_\_\_\_\_ Please contact me about making a donation. Type: \_\_\_\_\_

Comments:

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Send application and check or money order to: WACO Historical Society, South County Road. 25A, Troy, OH 45373 . If you have questions, please call us at 937-335-9226