

International Member Application

*Please fill out the form (required fields are indicated by *) then print, sign, and return in person or by fax @780-800-9639. Applications may also be submitted electronically to the Chief Flight Instructor via e-mail at cfi@flyefc.ca*

APPLICANT INFORMATION

Title*: _____

Last Name*: _____

First Name*: _____

Home/Primary Phone*: _____

Work phone: _____

Cellular Phone: _____

Fax Number: _____

Date Of Birth*: _____

Gender: _____

Home Country Address*: _____

City*: _____

Province*: _____

Postal Code*: _____

Country*: _____

Canadian Address (If Known) : _____

City: _____

Province: _____

Postal Code: _____

Country: _____

E-Mail Address*: _____

CITIZENSHIP STATUS (if not Canadian)

Please check applicable*

Permanent resident/ Landed Immigrant

Student Visa

Other Visa

Date of Entry to Canada* (DD/MM/YY): _____

Country of current Citizenship*: _____

Country of residence during the past year: _____

Languages spoken fluently*: _____

TRAINING SCHEDULE:

Proposed Course Start Date(DD/MM/YY)*: _____

Note: Course schedule in place if joining the accelerate program. Please Indicate session start date. If unknown Please check the Edmonton Flying Club Website or contact us.

Do you have a pilot (Aviation) medical? ___Yes ___No (If Yes please provide a copy)

EMERGENCY CONTACT:

Contact Name*: _____ Relation: _____

Contact Phone*: _____ Secondary Phone: _____

By signing below, the applicant certifies that all information submitted is correct and current. The applicant also acknowledges receipt of the Edmonton Flying Club's General Rules and Regulations on the following page and the applicant's required adherence to it.

X _____ X

Applicant Signature

Date

Witness Signature

Applicants under the age of 18 must complete the following:

Availability for Interview

An interview is required for the accelerated program and can be done in person or through Skype.

Availability for interview*:

DECLARATION OF GUARDIAN CONSENT

I/We _____, being of legal guardian(s) of _____, do hereby give consent for him/her to take flying lessons at the Edmonton Flying Club and I/we will be responsible for any charges or expenses that my son/daughter may incur at the Edmonton Flying Club.

X _____ X

GUARDIAN SIGNATURE

DATE

WITNESS SIGNATURE

MEMBERSHIP

Assigned by EFC Staff

Member number: _____