



	Tick box	Admin	
Prospective		Booking	
Full		Mailing	
Associate		Met	
Social		Sky Demon	
Spitfire		Medical	

Membership Application 2023

Full £265		Associate £136		Half Year £150		Social £136	
All Pilots		Family pilot member		Jan/Jun or Jul /Dec		Spitfire £136	

Personal Details

Name _____

Address _____

County _____ Post Code _____

Mobile _____ Home _____ Work _____

E-Mail _____

Next of Kin Name _____ Tel _____

Pilot/Student information

Occupation _____ Date of Birth ____/____/____

Licence Number _____ Medical expiry Date ____/____/____

SEP expiry date ____/____/____ IMC/IR/IRR expiry date ____/____/____ Total hours P1 _____

Please provide a copy of your current medical certificate

Declaration

I hereby apply for membership of Enstone Flying Club. I agree to comply with the Flying Order book, Club rules, the Air navigation order and Rules of the Air and Air traffic regulations. I will also operate any club aeroplane in accordance with the appropriate Pilot operating handbook, insurance requirements and other relevant information.

I confirm I am the holder of a current licence and medical and will not act as pilot or crew unless:

1. I am fit to fly
2. I comply with any licence or medical conditions
3. I am in current practise and have a valid certificate of experience
4. I have read and signed the EFC flying order book.

I understand that I may be held liable for any insurance excess in the event of an accident, which is attributed to me

Signed _____ Date ____/____/____