



# SOUTHERN ARIZONA ROCKETRY ASSOCIATION

## APPLICATION FOR MEMBERSHIP

(PLEASE PRINT)



Name: \_\_\_\_\_

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

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

Home phone: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

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

NAR#: \_\_\_\_\_ Expires: \_\_\_\_\_ Cert level: \_\_\_\_

TRA#: \_\_\_\_\_ Expires: \_\_\_\_\_ Cert level: \_\_\_\_

\$25 Family  \$0 Children under 18 only  Donation: \$ \_\_\_\_\_

Your children under 18 who want SARA membership cards:  
\_\_\_\_\_

I am willing to participate on a club committee:  
 Range  Safety  Communications  Other: \_\_\_\_\_  
 I want to be trained for RSO, LCO, setup, and tear-down duties  
 I am willing to volunteer for events and projects. Please be specific:  
\_\_\_\_\_

### SARA Safety code:

I have read and agree to adhere to the applicable NAR and TRA safety codes. I agree to follow the SARA guidelines when using the SARA flying field at all SARA sanctioned flying events, and when flying on my own. If using radio control equipment, will adhere to the TIMPA rules. I promise to maintain the highest standards of personal performance possible at all SARA events. I am at least 18 years old and I agree that I am responsible for all damage and injury caused by rockets that I and all members of my family fly.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please enclose check or money order to "SARA" (no cash) and mail to:

SARA  
% DOUG FORESTER  
11450 N PALMETTO DUNES AVE  
ORO VALLEY, AZ 85737

Admin Use Only	
Date received:	_____
Amount: \$	_____
<input type="checkbox"/> Cash <input type="checkbox"/> Check #	_____
<input type="checkbox"/> Accounting complete	_____
<input type="checkbox"/> Data entry complete	_____

## THANK YOU FOR SUPPORTING SARA