



# Flying Tigers Club NEW Membership Form

Please Print

Member Name \_\_\_\_\_ Spouse/Partner Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Cell  Landline   
Please indicate if this is a Cell Phone or Landline

Email (this is how you will receive newsletters) \_\_\_\_\_

Years worked at **FTL** From (example: 1980) To (example: 1989) Dept/Position \_\_\_\_\_

Years worked at **FDX** From (example: 1989) To (example: 2013) Dept/Position \_\_\_\_\_

Department worked at FTL \_\_\_\_\_

Stations worked at FTL \_\_\_\_\_

**Membership Dues: \$15 USD Annually** Make checks payable to **Flying Tigers Club**

I have enclosed \$ \_\_\_\_\_ Regular Membership dues for \_\_\_\_\_ years

\_\_\_\_\_ Other (Donation)

*Mail to:*

Flying Tigers Club  
MEMBERSHIP  
P.O. Box 91296  
Los Angeles, CA 90009

**Use other side to tell us your news**

