## KANSAS AGRICULTURAL AVIATION ASSOCIATION Membership Application

NAME				SPOUSE		
Company Name						_
Address			Business			
City	State		Zip	Ce	II	_
Home or Business phone (please indicate which one	<del>e</del> )			Email		
	N	IEMBEI	RSHIP DUES	S		
Voting Member(s)	② \$125.00 ea	\$				
Associate Member(	s) @ \$95.00 ea					
Allied Member(s) @	② \$45.00 ea					
тот	AL DUES	\$				
NOTE: Voting membership cordially invited to participate			_	_	in WKAAA. Spou	ises are
	MEMBE	RSHIP	CLASSIFIC	ATIONS		
Voting Member: Any entity license or an agricultural pilot	that operates a va	lid 137 ce	ertificate in conj	junction with a		
Associate Member: Any member qualifications. This i						G or ALLIED
Allied Member: Any personagricultural aviation industry.	on who represents a	a busines	s which manufa	actures or sel	lls products related	to the
An Associate or Allied memb current are eligible to attend					All members whos	e dues are
Method of Payment: ☐ C	heck (Payable to K	AAA) <b>OF</b>	R MasterCard	□visa [	☐American Expres	SS
Cardholder Name						
Pa	y online at <u>www.ks</u>	agaviatioi	n.org or return	this form and	dues to:	

THIS FORM MUST BE RETURNED TO KAAA ON OR BEFORE DEC. 31, TO BE INCLUDED IN THE ANNUAL MEMBERSHIP DIRECTORY

PLEASE RETAIN COPY FOR YOUR RECORDS

NOTE: membership dues are not 100% tax deductible – please consult your tax advisor for latest information regarding tax deductions of dues

KAAA, Rhonda McCurry, P.O. Box 585, Colwich, Kan. 67030