

MEMBERSHIP FORM - 2024

Member Contact Information		
Full Name:	Date of Birth (dd/mm/yy):	
Address:		
City:	Province:	Postal Code:
E-Mail Address:		
Home Phone:	Work Phone:	Cell:
Emergency Contact Name:		Phone:

Please indicate your selection(s):

Membership Category
Flying Member (\$803)
Flying Member Spouse (\$752)
Flying Member & Family (\$866)
Youth/Air Cadet (\$288)
Junior (\$288)
Associate Member (\$217)

Note: Flying memberships include SAC membership fee.

Flying		
Flying Package #1 (Payment in Full \$601)		
Flying Package #1 (2 Half Payments \$301)		
Flying Package #2 (Payment in Full \$945)		
Flying Package #2 (2 Half Payments \$473)		

Summer Hangar Storage (Flying Members)	
Rigged Glider with Trailer Outside (\$293)	
Glider Trailer (\$321)	
Powered Aircraft (\$387)	

Camping (All Members)		
Services Campsite & Outside Storage (\$310)		
Unserviced Campsite (\$155)		
Air Conditioner Surcharge \$119)		

Other (see Fee Schedule at www.GatineauGlidingClub.ca/Join_GGC.html) Specify Other:

Note: Interac payments for all fees can be made to billing@gatineauglidingclub.ca

Please sign the waiver including witness on the following page.

Gatineau Gliding Club and Soaring Association of Canada Waiver of Indemnity (For Annual Membership)

KNOW ALL MEN BY THESE PRESENTS THAT I,	Please print full name	
OF ADDRESS	TELEPHONE	
do hereby accept all responsibilities of any membersh to as GGC) and the Soaring Association of Canada (h By-laws and Operating Rules of the GGC and the SAG	nereinafter referred to as SAC) and shall obey all the	
I do also hereby waive as against the GGC and the Socialims, demands, actions and causes of actions arising or death which I might suffer in any aircraft operated by whether that aircraft be in flight or be located upon the activity involving the said aircraft. Further, I exonerate arise in respect of any personal injury or disability o	ng directly or indirectly out of any injury or disability by, sponsored by or owned by the GGC or the SAC or property of the GGC or the SAC or in any ground the GGC and the SAC from all liability which may death or property damage suffered while I am a or SAC privileges, and undertake to make no claim in such personal injury, disability or death or property erson regardless of whether that person was a pan aircraft, automobile or other	
I certify that the information provided in this application agree to respect club property and abide by club rules account with the GGC and to pay any further charges	s. I pledge to maintain a positive balance in my	
I understand that there are risks associated with the sin a disciplined and conscientious manner so as to min		
I have read and understood this document and I agree to be bound by its terms.		
APPLICANT'S SIGNATURE:(Requires also witness signature and name below)	DATE:	
If applicant is under 18 years of age, parent/guardian	permission and signature are required:	
I (Print parent's/guardian's name)		
permit (print minor's name)		
to participate in GGC activities and to use its equipme		
PARENT'S/GUARDIAN'S SIGNATURE:	DATE:	
WITNESS SIGNATURE:	DATE:	
WITNESS NAME (Drint):		