

2018

CENTRAL ONTARIO GLIDER GROUP (COGG) APPLICATION FOR MEMBERSHIP (Please PRINT Clearly)



Name _____

Address _____ City _____

Province/State _____ Postal/Zip _____ Telephone _____

MAAC No. _____ LSF No. _____ Level _____ E-Mail _____
(Print very clearly!)

Transmitter Channels Used (in order of most to least used) 1: _____ 2: _____ 3: _____ 4: _____

Full Membership \$25.00
Senior (65 and over) \$20.00
Junior (under 18) First year free
(second year under 18) \$10.00

Please send newsletters by **Canada Post**
 E-mail

Send completed form and payment to:

Roy Bourke
56 Clareville Crescent
Toronto, ON, M2J 2C1

Amount enclosed _____

Cheque Money Order Other

(Do not send cash by mail. Please make cheques payable to C.O.G.G. or to Central Ontario Glider Group.)

Signature _____

Date _____

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