

Photo

AOPA TÜRKİYE – UÇAK SAHİPLERİ VE PİLOTLAR DERNEĞİ
(Sicil no: 34-281-170)

Adres: Postane mah. Çınarlı sk. 61 Tuzla - İstanbul

Member # : ____ / ____ **MEMBER REGISTRATION**

I have read the association's bylaws. I accept the objectives and responsibilities. I would like to become a member. My pilot license and/or aircraft registration document, along with my photograph, are attached. I commit to paying my membership fees during my membership and contributing to the activities. I kindly request acceptance of my membership.

...../...../202.....

Name, Surname, Signature

ID Information

Pilot & Aircraft Information

ID Number		Licence Number	
Name		Issue Date	
Surname		A/C Call Sign	
Date of birth		A/C Type	
Place of birth		Base AP	

Personal Info

Blood Group		Occupation	
		Languages	
Sex	F: <input type="checkbox"/>	M: <input type="checkbox"/>	
Address			Phone
		Mobile	
E-Mail	@		

Membership request of has been accepted, by the Board of Directors on the following date of/...../202.. and meeting number

Registered Member Account number :

Secretary General

Chairman of the Board