



Welcome To The Thrills Of Gliding !!!!

If you are here for a demonstration ride we hope you will enjoy what will undoubtedly be a memorable experience. We ask that you complete a release of liability form and discuss any concerns in advance with the Field Operations Officer or the Pilot In Command who will be flying with you today.

If you are interested in Membership please read on!!

Membership Information

Evergreen Soaring (ESI) is a chapter member of the [Soaring Society of America](#), which requires all ESI members to be SSA members. When you join ESI, if you are not already a member of the SSA, you must enroll as a member in SSA and you will be required to provide your SSA membership number as proof of enrollment. An application is attached to this packet. The SSA standard membership level is currently \$64.00 per year. In addition to joining the SSA, all club members must pay monthly dues - and either an annual flight fee for use of the club's gliders, or a per use fee, unless you have access to your own glider. We strive to keep costs low, and also offer special rates for families, students, and other considerations.

Current rates for new regular club members are:

SSA Membership \$64/year

Monthly membership fee \$30/month (\$360 /year)

ESI Initiation Fee –one time- \$250

Glider Use fees: \$25/month (\$300/year)or \$35/flight

Tow fees are set amounts, dependent on altitude of your tow, and are paid by all members receiving tows from ESI. Further explanation of club rates and fees are available on our website www.evergreensoaring.org Member applications are also available through the website.

Evergreen Soaring has some of the lowest membership costs of any glider club in the country, and we support this through volunteerism amongst our members. For the club to flourish, membership support beyond your dues is imperative. Traditionally, this support has taken different forms with different people, but there are some goals. **We ask that:**

- *All members support the club financially by paying their dues, in a timely manner;*
- *All members constantly endeavor to improve their flying abilities, in a safe manner;*
- *All members put some time into helping out on the field whenever they come out to fly, in a cheerful manner.*

We also hope members will strive to someday hold office or other positions of responsibility within the club. Perhaps most importantly, it is hoped that the members retain their individuality and enthusiasm for the club. That is the way the club has managed to prosper so far. Many of the experienced members have put in years of hard work to make the club the success it is today. It is up to the new membership to take on the responsibilities of the future.

Membership status is dependent on the currency of a member's financial account and members may be placed in other than Active Status by the Treasurer and/or Board of Directors. Please see the website for a description of membership status (Active, Inactive, Forced Inactive).

**So.... What are you waiting for?
Fill out the attached application to start your own Soaring Adventures today!**



MEMBERSHIP APPLICATION

REV 10/2008

Please complete both front and back pages

Application Date: ___/___/___

Name: _____ Email: _____@_____

Address: _____ City _____ State _____ Zip _____

Home Phone () _____ Business Phone: () _____ Cell Phone: () _____

Date of Birth ___/___/___

Emergency Contact: _____ Address _____

Phone _____ Relationship _____

MEMBERSHIP TYPE: FULL: W/Glider No Glider SPECIAL: Tow Instructor Student

Current SSA Member? NO YES – SSA Member No. _____

Pilot Ratings Held ---Check All Applicable

None

Student : Glider Power Other _____

Private Pilot: Glider Power Other _____

Commercial Private Pilot: Glider Power Other _____

Flight Instructor: Glider Power Other _____

Other Ratings: Power Mechanic Airframe Mechanic A.I. Mechanic

Flight Time: Gliders _____ Power _____ Glider Cross Country _____

Towplane _____ Aircraft Flown _____

How Many Hours in Last 12 Months? _____

Last BFR(s) _____

FAI Badges: Silver Gold Diamond Partials: _____

Gliders Flown: _____

ESI USE ONLY:

Page 2 Completed? YES NO ESI Member Name/Signature: _____

DEMO Ride Taken? YES NO Date ___/___/___ P.I.C. _____

Check No. _____ Amount (\$250 initiation minimum) _____ Date ___/___/___

Routing To: Coordinator ___/___/___ By: _____

Secretary for B.O.D. _____ By: _____

B.O.D. Action YES NO Date: ___/___/___

Applicant Notified ___/___/___ By: _____

Previous Clubs/Locations: _____

Any Accident History? Please give details _____

Have you applied for and been denied an FAA medical certification ? NO If YES, please explain: _____

OR Do you meet the FAA medical requirements as appropriate? YES If NO, please explain: _____

Any other information pertinent to your aviation experience?

By signature below I acknowledge that the information provided has been done so truthfully and to the best of my knowledge. _____ **Date** / / .

RELEASE OF LIABILITY

I am aware that flying involves risks including, but not limited to, the chance that I may be injured by the equipment used in the operation of a glider or through negligence on the part of Evergreen Soaring, its members or agents, or in the event of an aircraft accident.

I do hereby assume all risks and will hold Evergreen Soaring, its members, agents, and assigns harmless from any and all liability, actions, causes of action, debts, claims and demands of every kind and nature whatsoever which may arise from or in connection with my flight or my participation in other activities with Evergreen Soaring.

I further intend that this release shall serve as a release and assumption of risk for my heirs, executor and administrators and for all members of my family.

Should any part of this release be struck down as contrary to the laws of the State of Washington, I agree to be held to the terms of those parts which survive.

I have read the above release and agree to all its terms as part of my contract with Evergreen Soaring.

Date _____ Printed Name _____ Signature _____

Witnessed:

Date _____ Printed Name _____ Signature _____

(For Release by Minors)

I have read the above release and agree that the above minor of whom I am parent or legal guardian may consent to be held to all of its terms.

Date _____ Printed Name _____ Signature _____

Witnessed:

Date _____ Printed Name _____ Signature _____