



Hatz Biplane Association Membership/Renewal Form

****Please update information and return promptly! Also put any news or project information for the newsletter on the back.****

Name/Spouse Name: _____

Year Round/Summer Address: Start Date: _____ (n/a if year round address)

Address: _____

City/State/Zip Code: _____

Country: _____

Home Phone #: _____ Cell Phone #: _____

Winter Address (if applicable): Start Date: _____

Address: _____

City/State/Zip Code: _____

Country: _____

Home Phone #: _____ Cell Phone #: _____

Email Address: _____

Newsletter delivery preference: Email Postal

Base Airport:

Name: _____

Identifier: _____

City/State: _____

Base Airport:

Name: _____

Identifier: _____

City/State: _____

Hatz Project/Aircraft or Other Aircraft Owned:

Year:	Model Name:	Serial #:	N#:	Flying	Project
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

Annual Membership Dues: \$20.00

Please make check payable to the Hatz Biplane Association and send to:

Hatz Biplane Association

P.O. Box 85

Wild Rose, WI 54984

Telephone: 920-572-5954 email: brownlowod@aol.com website: www.hatzbiplane.com

Please make sure you return the completed form with your membership dues. Thank you in advance for your cooperation and support.