

# Carolinas Balloon Association



## MEMBERSHIP APPLICATION (1 Per Applicant)

New

Renewal

Name: Last First Middle  
Address: City: State: Zip: County:  
Phone: (Home) (Work) (Cell)  
Email:

### Balloon Pilot Registry Information ( Please update each year):

Certificate # Type [S] [P] [C] Date Issued: Mo Day Year  
Club Affils: BFA# AOPA# List Others:  
Flight Time in the last 12 Months: Hrs Total: Hrs

### Balloon Pilot Owner Information (Please update each year):

Manufacturer: Model: N#:  
Size AX- Volume: cu ft. Yr Built:  
Color/Pattern/Shape:  
Name of Balloon:

### Balloon Crew Registry Information (Please update each year):

Ground Crew Experience: Hrs Crewing: BFA Rank (Level):  
Type of Balloons Crewed for:

**I certify that this information is correct:**

Signature

Date

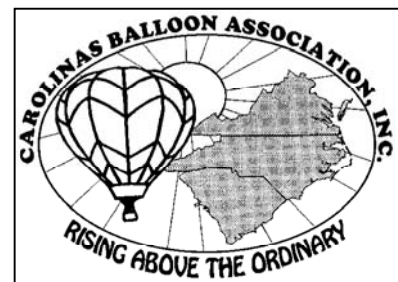
### Dues Information

Members - \$15.00 per year

Addition Family Member \$7.50 per year

Initiation Fee - \$5.00 For each new member

Total



Make checks payable to: Carolinas Balloon Association, Inc.  
Mail to: Jim Falls CBA Membership Chairman  
1013 York Road  
Kings Mountain, NC 28086

Dues are due January 1st of each year. New members should pro-rate membership from application date until next December 31st. (1.25 Per Month). All new members receive a patch and pen.