

North-East Florida Association of Rocketry (NEFAR)

National Association of Rocketry Section #563
Tripoli Rocketry Association Prefect #35

Annual Membership Application / Renewal

Illegible or incomplete applications will not be processed.

Last Name: _____ First Name: _____ Badge No: _____
(leave blank)

Address: _____ City/State: _____ ZIP: _____

Home Phone: (____) ____ - ____ Work Phone: (____) ____ - ____ Cell Phone: (____) ____ - ____

Date of Birth: ____ / ____ / ____ Age: ____ E-Mail Address: _____
E-Mails are secured and only used for NEFAR notifications and updates

TRA Member: Yes / No TRA Number: _____ Expires: _____ Certification Level: _____

NAR Member: Yes / No NAR Number: _____ Expires: _____ Certification Level: _____

Club Membership Fee: Individual Adult: \$30.00 Family: \$45.00
(18 years and up) (Covers one adult + up to two minor children.)
List additional family members below

Checks should be made out to: *Robb Haskins*
Put on Memo line: *NEFAR Membership*

Membership fees will be pro-rated for **new members only** as follows:
After June-01: Individual Adult \$20.00 / Family \$30.00

Membership forms/payment can be sent to:
Robb Haskins
NEFAR Membership
5463 White Heron Place
Oviedo, FL 32765

Daily Range Fees:

\$10-Member Family: \$15-Member
\$15-Non-Member first TWO launches/\$20 thereafter \$20-Non-Member first TWO launches/\$25 thereafter

Additional Family Members

The \$45 Family Membership fee covers only one adult + up to two minor children.
Any more than two minor children will be subject to an ADDITIONAL \$5 daily range fee PER ADDITIONAL CHILD.

Name: _____ Age: ____ Date of Birth: ____ / ____ / ____ Badge No: _____
(leave blank)

TRA Member: Yes / No TRA Number: _____ Expires: _____ Certification Level: _____

NAR Member: Yes / No NAR Number: _____ Expires: _____ Certification Level: _____

Name: _____ Age: ____ Date of Birth: ____ / ____ / ____ Badge No: _____
(leave blank)

TRA Member: Yes / No TRA Number: _____ Expires: _____ Certification Level: _____

NAR Member: Yes / No NAR Number: _____ Expires: _____ Certification Level: _____

Print Name: _____

Signature: _____

Date: _____