

**Welcome to the NorthEast Florida Association of Rocketry.  
N.E.F.A.R. contains Tripoli Prefecture # 35 and NAR section #563.**

## Collegiate Team Application for Membership

Please print clearly

Team Lead Name: \_\_\_\_\_ Complete pages 2 and 3  
School Name \_\_\_\_\_ to add up to 9 additional members.  
\_\_\_\_\_  
City \_\_\_\_\_  
State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_  
E-Mail \_\_\_\_\_  
Web Page \_\_\_\_\_  Link My Webpage to the NEFAR Website  
Telephone \_\_\_\_\_ Fax: \_\_\_\_\_  
Date Of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Date Of Application \_\_\_\_/\_\_\_\_/\_\_\_\_  
Team Lead Certification Level and Certifying Authority:  L1  L2  L3  NAR  TRA  
NAR # \_\_\_\_\_ TRA # \_\_\_\_\_

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Faculty Advisor for this team: \_\_\_\_\_  
Faculty Advisor e-mail: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Team mentor: \_\_\_\_\_  
Mentor's e-mail: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Mentor's Certification level and certifying Authority:  L1  L2  L3  NAR  TRA

- College Organization Membership \$45. per year  
(Complete second page, and more such pages to include up to 10 members of this organization)

Completed Application and Dues should be sent in the form of a check payable to:

**Steve Ghioto** and sent to:

Northeast Florida Association of Rocketry  
18015 NW 46 Ave.  
Alachua. FL 32615

Alternately, payment may be sent via PayPal to Steve Ghioto at [ssmagg@hotmail.com](mailto:ssmagg@hotmail.com)"

## ADDITIONAL TEAM MEMBERS

Name \_\_\_\_\_ Date Of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
E-Mail \_\_\_\_\_  Add me to NEFAR Facebook Page  
Web Page \_\_\_\_\_  Link My Webpage to The N.E.FAR Website  
NAR # \_\_\_\_\_ TRA # \_\_\_\_\_  
Certification Level and Certifying Authority:  L1  L2  L3  NAR  TRA

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