

## SOARING UNION OF LOS ANGELES 2025 PATRON MEMBERSHIP APPLICATION

FIRST/LAST NAME	SPOL	JSE'S NAME	Date	_
ADDRESS		BIRTHDATE		
CITY		STATE	ZIP	
PRIMARY PHONE	EMERGENCY CO	NTACT PHONE		
AMA# (attach copy) (Please write clearly)	E MAIL			
We welcome your application for PATRO As a PATRON member you will be exem allows your club to leverage the City and	pt from the daily pilot contribu	utions for a full ye	ar. This unique membership	
Your signature below indicates compliants are reast a member of SULA. The tenants are reast the SULA field safety rules and conduparticipation at the field or event repressly their insurance policy. This provides the above could result in suspension or SULA club PATRON member, it is hoped presence and support at the field and o	membership of the Academy of ucting yourself in a manner con senting SULA. If not already a r for liability insurance while ope revocation of your flying privil If that you will participate in van	f Model Aeronautinsistent with good member, join AMA erating any modelege or club memb	cs (AMA), agreement to abid sportsmanship while so that flying will be covered aircraft. Noncompliance with ership. Also, by becoming a	le d
SIGNATURE		SULA w	vebsite: https://sula.club/	
□ ONE TIME PAYMENT OF \$700	DUES SCHEDULE			
TOTAL AMOUNT RECEIVED	CASH □ CHK#	RECEIVED	BY	
MAKE CHECK PAYABLE TO S.U.L.A.	PLEASE GI	VE TO A BOARD M	EMBER OR MAIL TO:	
	<b>←</b>	P.O. BOX 3816 TORRANCE, CA	N OF LOS ANGELES 90510-3816  DF AMA CARD HERE	