



# NOTRA MEMBERSHIP APPLICATION

## Membership Type

New Member \_\_\_\_ Renewal \_\_\_\_

## Member Information

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phones: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Website \_\_\_\_\_

## Rocketry Information

NAR # \_\_\_\_\_ NAR Level \_\_\_\_\_ NAR Expiration Date \_\_\_\_\_

TRA # \_\_\_\_\_ TRA Level \_\_\_\_\_ TRA Expiration Date \_\_\_\_\_

Do you have a LEUP? Yes \_\_\_\_ No \_\_\_\_

Signature \_\_\_\_\_ Today's Date \_\_\_\_\_

## For Club Use Only

Dues Received \_\_\_\_\_ Received By \_\_\_\_\_ Date \_\_\_\_\_

NAR Information Checked \_\_\_\_\_ TRA Information Checked \_\_\_\_\_

New Member Sponser \_\_\_\_\_

Comments: