Date:	
Membership Type:	
Waiver signed and attached:	
Local Checkout Flight Date:	
CFIG Recommended:	

NEVADA SOARING ASSOCIATION MEMBERSHIP APPLICATION 2025

I am applying for a Regular, Family, Owner, Student, Military Membership (circle one) in NSA. If accepted, I agree to comply with the rules and policies of NSA and ASI. I agree to pay \$______, a non refundable initial fee, maintain membership in ASI, and I will keep my account paid at least quarterly.

Name:			
Address:			
Address:			
Vork Phone:Home:		Cell:	
Email:			
Emergency Contact(s)/Relationship/Ph			
FAA Licenses/Ratings:			
Certificate Number:			
otal Pilot Hours:			
otal Glider Hours:			
SA Badges:			
Date of Last Flight Review:			
ow Pilot Hours:Taildra	igger:		
Signature:			
Date:			
Approval by NSA Officer:			_

Dues: \$140 per quarter if paid quarterly or \$550 per year if paid lump sum additional family member \$200 per year

Name :
NSA's New Member Checklist
NSA Membership Application
Pilot's Logbook and Certificate Checked
Waiver Initialed and Signed
Payment Received
NSA Policies & By-laws Read
ASI Policies (white binder) Read
Review Field Rules, Gliderport Diagram
Review Tow Procedures, Tow Signals, Radio Frequencies, Transponder/ADSB use
Sign Log in back of white binder. Initialed by checkout person.
Review Pilot's Operating Handbook
Review oxygen, water, and food requirements.
Satisfactory Checkout Flight(s)
Logging Flight Time in Glider Logbook
Checkout by: