

# AMERICAN AVIATION HISTORICAL SOCIETY

## MEMBERSHIP APPLICATION

Please enroll me as a member of the AAHS for the period specified. Enclosed is my check (money order, bank draft or credit card information) for annual dues as checked below. I understand that I will receive all issues of the *AAHS Journal* published to date during this calendar year (regardless of the date of joining), plus those issues of the *FlightLine* published after the date of joining. I also understand that renewal is due at the end of the calendar year in which membership will expire. (Valid through Dec/2023)

- |                   |                                 |                |                                  |                 |
|-------------------|---------------------------------|----------------|----------------------------------|-----------------|
| U.S.              | <input type="checkbox"/> 1 year | <b>\$50.00</b> | <input type="checkbox"/> 2 years | <b>\$96.00</b>  |
| Mexico and Canada | <input type="checkbox"/> 1 year | <b>\$69.00</b> | <input type="checkbox"/> 2 Years | <b>\$129.00</b> |
| Other countries   | <input type="checkbox"/> 1 year | <b>\$81.00</b> | <input type="checkbox"/> 2 years | <b>\$157.00</b> |
| e-Membership*     | <input type="checkbox"/> 1 year | <b>\$32.00</b> | <input type="checkbox"/> 2 years | <b>\$60.00</b>  |

\*(Electronic *Journals* and *FLIGHTLINES* only – REQUIRES email address)

Make checks, money orders, bank drafts, and credit cards to AAHS in U.S. funds

Enclosed is my check/money order for \$ \_\_\_\_\_

NAME \_\_\_\_\_

STREET \_\_\_\_\_

CITY \_\_\_\_\_

STATE/COUNTRY \_\_\_\_\_

ZIP/Postal Code \_\_\_\_\_

EMAIL ADDRESS (Required for e-Membership) \_\_\_\_\_

This is a:  New Membership  Renewal Membership

Charge to  VISA  MasterCard  Discover  American Express

Account # \_\_\_\_\_ Exp. Date \_\_\_\_\_

SIGNATURE \_\_\_\_\_

### Member Survey

Area(s) of Interest:

- |   |  |                                     |                               |                                  |
|---|--|-------------------------------------|-------------------------------|----------------------------------|
| <input type="checkbox"/> Early Aviation   | <input type="checkbox"/> WWI                   | <input type="checkbox"/> Golden Age | <input type="checkbox"/> WW2  | <input type="checkbox"/> Jet Age |
| <input type="checkbox"/> Personalities    | <input type="checkbox"/> Commercial            | <input type="checkbox"/> USAF       | <input type="checkbox"/> Navy | <input type="checkbox"/> Marines |
| <input type="checkbox"/> General Aviation | <input type="checkbox"/> Experimental/Research |                                     |                               |                                  |
| <input type="checkbox"/> Other _____      |  |                                     |                               |                                  |

Survey; responses will help us with future plans:

I would prefer receiving:

- |                         |                               |                                |                                   |
|-------------------------|-------------------------------|--------------------------------|-----------------------------------|
| Notifications via       | <input type="checkbox"/> post | <input type="checkbox"/> email | <input type="checkbox"/> Web site |
| <i>FlightLine</i> via   | <input type="checkbox"/> post | <input type="checkbox"/> email | <input type="checkbox"/> Web site |
| <i>AAHS Journal</i> via | <input type="checkbox"/> post | <input type="checkbox"/> email | <input type="checkbox"/> Web site |

**Mail to: AAHS**  
**P.O Box 3023**  
**Huntington Beach, CA 92605-3023**  
**Phone: (714) 549-4818**