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\$20.00

EAA Chapter 691 Membership Application/ Renewal

Please make checks payable to: EAA Chapter 691

Name: _____

Spouse/Partner's Name _____

EAA# _____ Expiration Date (MM/YY) ____/____

Address: _____

City: _____ State: _____ ZIP: _____

E-mail address: _____

HM phone: _____

WK phone: _____

Cell phone: _____

Your projects (finished or in progress) as well as currently flying A/C.
