

SOUTHWEST VIRGINIA HANG GLIDING AND PARAGLIDING ASSOCIATION
MEMBERSHIP APPLICATION FORM

Name: _____ Date: _____

Address1: _____

Address2: _____

City _____ State _____ Zip _____

Provide phone numbers that you wish to be used for flying/club related communication:

Phone(home): _____

Phone(work): _____

Phone(cell): _____

email address: _____

USHPA #: _____ Expiration: _____ Pilot Rating: HG ____ PG ____

List signoffs & appointments (i.e., XC, turbulence, flat slope launch, Observer, etc):

Ham Radio Call Sign: _____

Emergency Contact Information:

Name: _____

Phone Numbers: _____

(3/26/2024)