

**CABOOLTURE AERO CLUB**

Lot 451 McNaught Road  
Caboolture QLD 4510

ABN: 43 072 594 059  
www.cabooltureaeroclub.com.au



Latitude: 27° 05'  
Longitude: 152° 59'

Airfield Telephone: 0488 922 245

Email:

[membershipofficer@cabooltureaeroclub.com.au](mailto:membershipofficer@cabooltureaeroclub.com.au)

**APPLICATION FOR MEMBERSHIP -**

please use capital letters if handwriting

The Secretary,  
I, (Full Name)

of  
Suburb: State: Post Code:  
hereby apply for of the Caboolture Aero Club.

I understand that acceptance of my application is subject to confirmation by the Management Committee of the Caboolture Aero Club and in the event that my application is accepted, I agree to be bound by the rules and by-laws of the Club and will comply with the Caboolture Airfield Operations Manual with any amendments approved by the Committee.

Dated this: Signature:

We the undersigned, being financial FULL members of the Caboolture Aero Club, certify that the above named applicant is known to us and recommend them for membership of the Caboolture Aero Club.

Proposed by: of (Suburb)

Signature:

Seconded by: of (Suburb)

Signature:

Please complete the reverse side of the application

**Indicative MEMBERSHIP FEES – Including GST**

***Once Membership Approved by Committee an Invoice will be sent to you***

- Full Membership 1<sup>st</sup> July to 30<sup>th</sup> June \*\* \$269.50 per annum
- Social Membership \$22.00 per annum
- Junior Membership (under 18 YOA) \$16.50 per annum
- If you are applying for Full Membership AND own a hangar or aircraft at the Airfield you may apply for a Gate Key Card \$22.00 (non-refundable)

\*\* Pro-rata membership is calculated in full months

Office Use Only:

Member Number	
Gate Card(s)	

Membership approved at Management Committee meeting held : / / 20 Signed : ..... (Membership Officer)

**CABOOLTURE AERO CLUB**  
**MEMBER'S FILE DATA**

*please use capital letters if handwriting*

Postal Address (if different):

Suburb:

State:

Post Code:

Telephone Numbers: Home: ( ... ) ..... Business: ( ... ) .....

*Tick Preferred*

Mobile: .....

Email address (*please use capital letters if handwriting*)

.....

Aircraft Type Owned ..... Hangar No  ..... (Rego No.)

Aircraft Type Owned ..... Hangar No  ..... (Rego No.)

To issue Gate Card we require Vehicle Make, Model, Colour and registration  
(all changes of vehicle must be notified).

Vehicle Make & Model	Vehicle Colour	Registration No	Sticker No.

Aviation interest(s):

- |                              |                                |
|------------------------------|--------------------------------|
| ▪ General Aviation: .....    | ▪ Rotary Wing: .....           |
| ▪ Sport Aviation: .....      | ▪ Ballooning: .....            |
| ▪ Ultralights: .....         | ▪ Warbirds / Historical: ..... |
| ▪ Gliding: .....             | ▪ Parachuting: .....           |
| ▪ Gyro: .....                | ▪ Power Parachute: .....       |
| ▪ Trikes Weight-Shift: ..... | • Other (What is it?) .....    |

Pilot Licence held (Types):