

# Pennsylvania Avenue Radio Control Society

## 2026 MEMBERSHIP APPLICATION

### & RENEWAL FORM

I hereby apply for membership in the Pennsylvania Avenue Radio Control Society ("PARCS"). I understand that I must first be a member of, or have applied for membership to, the Academy of Model Aeronautics ("AMA"), and registered with the Federal Aviation Administration ("FAA") prior to submitting this membership application. A copy of your current and valid AMA card and FAA registration must be supplied with this application, or prior to its approval

Academy of Model Aeronautics  
5151 East Memorial Drive  
Muncie, IN 47302  
(800) 435-9262

FAA website - Use the section "UAS Flown by Recreational Flyers and Modeler Community-Based Organizations."  
[https://www.faa.gov/uas/recreational\\_fliers/](https://www.faa.gov/uas/recreational_fliers/)

- RENEWAL - Annual donation = \$125.00  
 **NEW MEMBER** – Please add a one-time club initiation fee of \$75.00  
 I request PARCS provide me flight instruction

List other current or prior model flying club memberships. \_\_\_\_\_

Number of years flying model planes? \_\_\_\_\_

\_\_\_\_\_  
First Name Last Name M.I.

\_\_\_\_\_  
AMA Membership #

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
FAA Registration #

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Your Cell Phone Emergency Contact Phone #

\_\_\_\_\_  
Email Address

**Mail Forms and Check to:**  
PARCS c/o  
Len McIntosh  
51 Jesse Street, Freeport, NY 11520  
  
You MUST include a self-addressed, stamped envelope

Be advised that all members of the PARCS are Safety Officers and have an obligation to ensure that they, and everyone else, operate their aircraft in a safe manner consistent with the published PARCS Field Rules & By-Laws, and the AMA Safety Code. If you want to fly Turbines, an AMA waiver and skills demonstration are required.

\_\_\_\_\_  
Print Name Sign Name Date Signed

OFFICIAL USE ONLY	<input type="checkbox"/> CASH Rec'd By: _____ Date: _____	PARCS 2026
	<input type="checkbox"/> CHECK # _____ TOTAL Amount Paid: \$ _____	