



**MOTORISED AVIATION AND GLIDING  
ASSOCIATION OF SOUTH AFRICA  
ARO/011**

**MEMBERSHIP APPLICANT INFORMATION**

Name:

Date of birth: YYYY - MM - DD

Identity Number:

Current address:

City:

Province:

Email :

Home Airfield:

Phone:

**LICENSE INFORMATION**

Pilots Lic No:

Type : (e.g. TMG, PPL, CPL, ATPL etc.)

Year of initial issue:

**EMERGENCY CONTACT**

Name of a relative not residing with you:

Address:

Phone:

City:

Province:

Relationship:

**SIGNATURES**

"I undertake to abide by and conform to the approved Constitution, Manual of Procedures and By-laws of the MOTORISED AVIATION AND GLIDING ASSOCIATION OF SOUTH AFRICA (MOGAS) as amended from time to time, at all times doing my utmost to maintain and preserve its status, dignity and prestige in the eyes of all." Please return signed form to **mandy@airplay.co.za**

Signature of applicant:

Date:

**Banking Details:**

FNB

Branch: Randburg 254005

Acc: 62692304076

**Send proof of payment to *mandy@airplay.co.za* with your Name as reference**

**Fee:**

**R250** per annum  
(subject to review)