



Aviation Instrument Association

MEMBERSHIP APPLICATION

Full Membership (FAA Certificated Repair Station)
Associate Membership

Mail completed application and payment to:

Aviation Instrument Association
Attn: Kathy Randall
2700 Fort Trenholm Road
Johns Island, SC 29455 USA

Annual membership dues of \$250.00 must accompany this completed application.

Company Name: _____

Membership Contact Name: _____

Title: _____ Date of Application: _____

Address: _____

City: _____ State: _____ Zip/Postal Code: _____

Country: _____ Province: _____

Telephone: _____ Fax: _____

Toll Free: _____ Cell: _____

Email: _____

Company Website URL: _____

FAA Repair Station#: _____ Date Issued: _____

Ratings: _____

Specialties: _____

Manufacture/Other: _____

OFFICE USE ONLY:

APPROVED

REJECTED

INCOMPLETE

Check# _____ Date Paid _____ Renewal Date _____ Initials: _____