

Great Eastern Balloon Association

Membership Dues for 2021

NOTE - For returning 2020 members, membership fee is half price



Return form and check payable to GEBA, Inc. to:

Robin Smith
375 Potomac Drive
Basking Ridge, NJ 07920
ATTN: GEBA

For your convenience GEBA register via credit card at: <http://www.gebaballoon.org/>

Primary Member Data

Name: _____

Street Address: _____

City, St, Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____ Verify: _____

BFA membership #, if applicable: _____

Status (check one)	<input type="checkbox"/> Commercial Pilot <input type="checkbox"/> Flight Examiner <input type="checkbox"/> Private Pilot	<input type="checkbox"/> Crew <input type="checkbox"/> Honorary <input type="checkbox"/> Repair Station <input type="checkbox"/> Student Pilot
Dues data (check one)	<input type="checkbox"/> \$15 – Pilot Member <input type="checkbox"/> \$12.50 – Associate <input type="checkbox"/> \$20 – Family	(Holds FAA LTA Pilot Certificate) (Student, Crew, other non-pilot) (Covers Individuals In Same House, max is 5)

For non-2020 members, prices are \$30 Pilot, \$25 Associate and \$40 Family Membership for 2021 Membership.

Areas of interest (indicate one or more areas of optional interest)

- Landowner Relations Social Committee Newsletter (*Skywriter*)
 Competition Membership Committee
 Please check this box if you wish to get emails concerning GEBA competition events.
 Please check this box if you like to be listed as a Commercial Pilot on our website.

Dues are payable, in full, when you join the association and are renewable on January 1st of each year. Please print carefully. Return this form with your check made payable to: "GEBA, Inc " to the address at top.

For Geba use only
Check # _____
Date Rcvd: _____
Check \$ _____

Use The Area Below To Record Information For Additional Family Members age 14 and above living in house

Name: _____

Cell Phone: _____ BFA membership #, if applicable: _____

Email: _____ Verify: _____

Status (check one)	<input type="checkbox"/> Commercial Pilot	<input type="checkbox"/> Crew	<input type="checkbox"/> Repair Station	<input type="checkbox"/> Student Pilot
Areas of Interest	<input type="checkbox"/> Landowner Relations	<input type="checkbox"/> Social Committee	<input type="checkbox"/> Newsletter (<i>Skywriter</i>)	
	<input type="checkbox"/> Competition	<input type="checkbox"/> Membership Committee	<input type="checkbox"/> Safety Seminar	

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Name: _____

Cell Phone: _____ BFA membership #, if applicable: _____

Email: _____ Verify: _____

Status (check one)	<input type="checkbox"/> Commercial Pilot	<input type="checkbox"/> Crew	<input type="checkbox"/> Repair Station	<input type="checkbox"/> Student Pilot
Areas of Interest	<input type="checkbox"/> Landowner Relations	<input type="checkbox"/> Social Committee	<input type="checkbox"/> Newsletter (<i>Skywriter</i>)	
	<input type="checkbox"/> Competition	<input type="checkbox"/> Membership Committee	<input type="checkbox"/> Safety Seminar	

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Email: _____ Verify: _____

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Areas of Interest	<input type="checkbox"/> Landowner Relations	<input type="checkbox"/> Social Committee	<input type="checkbox"/> Newsletter (<i>Skywriter</i>)	
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