

# Great Eastern Balloon Association

## Membership Dues for 2022



### 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: \_\_\_\_\_

3FA membership #, if applicable: \_\_\_\_\_

<b>Status</b> (check one)	<input type="checkbox"/> Commercial Pilot	<input type="checkbox"/> Crew
	<input type="checkbox"/> Flight Examiner	<input type="checkbox"/> Honorary
	<input type="checkbox"/> Private Pilot	<input type="checkbox"/> Repair Station
		<input type="checkbox"/> Student Pilot
<b>Dues data</b> (check one)	<input type="checkbox"/> \$25 – Individual Member[pilots and non-pilots]	
	<input type="checkbox"/> \$40 – Family[Covers Individuals In Same House, max is 5.]	

### **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 1<sup>st</sup> of each year. Please print carefully. Return this form with your check made payable to: "GEBA, Inc " to the address at top.**

<b>For Geba use only</b>
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: \_\_\_\_\_

<b>Status</b> (check one)	<input type="checkbox"/> Commercial Pilot	<input type="checkbox"/> Crew	
	<input type="checkbox"/> Private Pilot	<input type="checkbox"/> Repair Station	<input type="checkbox"/> Student Pilot
<b>Areas of Interest</b>	<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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Cell Phone: \_\_\_\_\_

BFA membership #, if applicable: \_\_\_\_\_

Email: \_\_\_\_\_

Verify: \_\_\_\_\_

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Verify: \_\_\_\_\_

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Verify: \_\_\_\_\_

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