

Last Name: _____ Date: _____

Pilot's First Name: _____ Badge Name: _____

Pilot Badge type: Pin Back or Magnet Back Co-Pilot Badge type: Pin Back or Magnet Back

Co-Pilot's First Name: _____ Badge Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Winter Address(if different from above): _____

Pilot Phone #: _____ Co-Pilot Phone #: _____

Primary Email: _____

FRVA #: _____ Note: *Must be a member of FRVA in good standing before joining our Chapter. If you are not currently a member of FRVA, you may phone 1-800-543-3622 and request to apply over the phone. They will immediately issue your membership number, which must be included on this application.*

Rig Information: Make: _____ Model: _____

# of Slides: _____ Length: _____ ft Year: _____

Mail your completed application and either a check or use Zelle for $50 which includes Club badges ($35) and first year membership ($15). Annual dues are $15 per year per coach. Make check payable to **Overland Trailblazers West** or pay using Zelle with Account Name **otbwtreasurer@gmail.com**

Mail application and check if not paying using Zelle to:
Peter Jautaikis, Treasurer 1613 Augusta Pointe Drive, Ripon, CA 95366

Signature allows Overland Trailblazers West to contact me by mail, phone or email

Signature: _____ Date: _____