APPLICATION FORM

AeSM/JG/Jan2020

**JUNIOR AVIATORS**

AERONAUTICAL SOCIETY OF MAURITIUS (AeSM)

This is to confirm that

I am interested in joining the JUNIOR AVIATIORS of The Aeronautical Society of Mauritius (AeSM)

MY NAME ………………..……………………………………………………………………………………………………………………………….

MY AGE…………………….. (You should be between 12 and 18 years old) DATE of BIRTH…………………………..

MY FORM in SCHOOL ……………………………………………..….or GRADE …………………………….……………………………..

 MY EMAIL ADDRESS …..……………………………………………………TEL. NUMBER…………………………………………………..

Parental support

PARENT/GUARDIAN NAME ……………………………………………………………………………………………………………………….

I am willing for my son/daughter to apply for membership of the JUNIOR AVIATORS of the AeSM

SIGNATURE ………………………… DATE ………………………………

Parent/Guardians TEL NO. or email address …………………………………………………

To Note: An Annual membership fee of RS 50 is proposed as confirmation of serious interest. Activities related to aviation will be arranged during school holidays, which may require an additional cost for transport.

*Completed forms to be emailed to Secretary AeSM,* *secretary@aesm.mu*