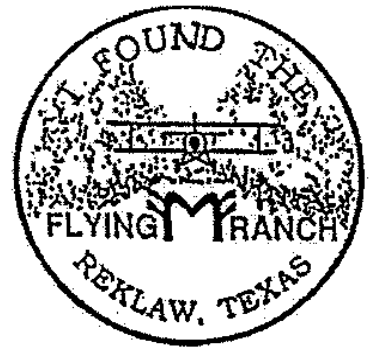




NUMBER IN PARTY _____

PILOTS CIRCLE ONE:

CUB / CUB COPY NON-CUB



**FLYING M RANCH FLY-IN & CAMPOUT
& SOUTH CENTRAL CUB MIGRATION**

PLEASE PRINT CLEARLY !!!

NAME _____ AGE _____ (FOR TROPHY)

MAILING ADDRESS: _____ CITY _____ STATE _____ ZIP _____

HOME PHONE: _____ EMAIL ADDRESS _____

CHECK: FLEW IN AS PILOT IN COMMAND: DISTANCE FLOWN STATUTE MILES _____

FLEW IN AS PASSENGER IN PLANE DROVE IN CAMPING ON SITE

SATURDAY ONLY WEEKEND REGISTRATION

(FILL OUT BY PILOT ONLY)

YEAR, TYPE OF PLANE FLOWN IN: _____ N# _____

OTHER AIRCRAFT YOU OWN: _____

AVIATION CLUB MEMBERSHIPS: _____

Cut here

