

**STUART FLYING CLUB, INC.**  
**Flying Membership Application**

**1) Membership Eligibility:**

Any student or rated pilot who is interested in the promotion of general aviation and flying is eligible to apply for membership. Applications are carefully screened for consideration of membership.

**2) Flight Check Rides Required:**

An initial check out with a club designated instructor or officer is required for each club aircraft type a member is qualified to fly. The standard checkout may or may not include IFR operations, but IFR operations in Club Aircraft are restricted to members who have satisfactorily completed a checkout with Stuart Flying Club that includes IFR operations. Flight instructors who wish to provide flight instruction with the club must complete a separate instructor's checkout.

A checkout may only apply to a specific Aircraft Category, Class, Type, or may apply to multiple thereof, or even to a singular aircraft, at the discretion of the Stuart Flying Club.

**3) Cost:**

- A. A Flying Member shall have deposited with the club upon signing of this agreement the sum of two hundred dollars \$200.00 the cost of membership to join the Stuart Flying Club, Inc.
- B. The member agrees to pay the club's per hour rate for each hour of elapsed time on the designated meter in the aircraft.
- C. The member agrees to refill the aircraft to its tabs, or other agreed upon level, by requesting full service refueling from Atlantic Aviation under the account of the member at the conclusion of each flight reservation.
- D. Flying Members agree to pay the club monthly dues of one hundred twenty-five dollars \$125.00. These fees are used to pay for the fixed operating cost of the club and are adjusted periodically. The dues are to be paid by the first of the month.
- E. All bills are due upon presentation and a 2.5% monthly interest charge will be levied on all bills more than 15 days past due.

**4) Member agrees to:**

Abide by the most recent bylaws and operating procedures.

**5) Legalities:**

- A. Member agrees to indemnify and hold harmless the club against any loss, liability or damage to persons or property in excess of the amount of insurance coverage while the member is in control of the aircraft. The member waives any claim that said member, his property, or his person may generate as a result of such losses, liability or damage to persons or property through use of the club plane.
- B. This agreement shall be construed in accordance with the laws of the state of Florida.
- C. This agreement may not be transferred, assigned, sold or otherwise negotiated without the written consent of the club.

- D. The club reserves the right to increase the cost of membership and/or aircraft hourly cost or dues because of unforeseen circumstances such as inflation, increased insurance rates, etc.
- E. Any member wishing to terminate his obligation under this agreement, may do so as follows: By forfeiting this agreement in writing, paying the balance due on any unpaid amount owed the club and returning keys, airport badges and key cards to the club.
- F. The member agrees that all expenses incurred by the club for collection of any sums under this agreement, including reasonable attorney fees, court costs, sheriff fee, interest, etc., may be added to the sum due there under, to be paid as part thereof.

This contract constitutes an agreement between the club and the family member. Amendments may be made as agreed to in writing by the member and the club. The member hereby acknowledges receipt of a completed copy of this agreement as witnessed by his/her signature.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Revised 06/04/2026

**STUART FLYING CLUB, INC. GENERAL MEMBERSHIP APPLICATION**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ No. Yrs.: \_\_\_\_\_

DOB: \_\_\_\_\_ D/L No: \_\_\_\_\_ State: \_\_\_\_\_ Sex: \_\_\_\_\_

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

Do you have a pilot's certificate? Y / N Certificate Number: \_\_\_\_\_

Ratings: \_\_\_\_\_

Date of last BFR/Checkride: \_\_\_\_\_

Date of Medical: \_\_\_\_\_ Class: \_\_\_\_\_

Total # of Hrs: \_\_\_\_\_ Total Hrs of PIC: \_\_\_\_\_

Have you ever had an aircraft accident as pilot in command? Y / N

When? \_\_\_\_\_ Explain: \_\_\_\_\_

\_\_\_\_\_

Have you ever been arrested? Y / N

Have you ever had a civil action filed against you or been the subject of a suit/bankruptcy? Y / N

Explain arrests or civil actions: \_\_\_\_\_

\_\_\_\_\_

Person to notify in an Emergency: \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Referred By: \_\_\_\_\_

Personal Reference: \_\_\_\_\_ Phone: \_\_\_\_\_

**I \_\_\_\_\_ ATTEST THE INFORMATION I HAVE GIVEN ON THIS FORM IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE. I GIVE THE HEARTLAND FLYERS FLYING CLUB, INC. PERMISSION TO VERIFY THE INFORMATION CONTAINED HERE ON MY CREDIT AND CRIMINAL HISTORY CHECKS. I AGREE TO ABIDE BY THE BY LAWS AND OPERATING PROCEDURES AND REALIZE ANY FALSE INFORMATION CAN BE GROUNDS FOR LOSS OF CLUB PRIVILEGES. I AGREE TO GIVE THE CLUB PERMISSION TO USE THE INFORMATION CONTAINED ON THE APPLICATION AND WILL HOLD THEM HARMLESS SHOULD MY APPLICATION BE REJECTED.**

Name of Check Pilot: \_\_\_\_\_ Approval: Y/N

Date: \_\_\_\_\_ Note: \_\_\_\_\_

Comments: \_\_\_\_\_

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