

# Commemorative Air Force Training Squadron One

Julie Smith, Finance Officer  
04 Puesta Del Sol  
Placitas, NM 78043

## Traron Membership Application Qualifications:

You must be a member of the Commemorative Air Force in good standing and to obtain a FORMATION AND SENIOR PILOT RATING you must be a rated CAF Pilot.  
(see CAF Reg. 60-2 for pilot qualifications & your local FEB)

Last Name \_\_\_\_\_  
First Name \_\_\_\_\_ MI \_\_\_\_\_ Col # \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Home Phone ( ) \_\_\_\_\_ Bus. Phone ( ) \_\_\_\_\_  
FAX ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_  
CAF PILOT (y/n) \_\_\_\_\_ CAF Rating \_\_\_\_\_  
CIV. PILOT (y/n) \_\_\_\_\_ Ratings \_\_\_\_\_ Total  
Time PIC \_\_\_\_\_ Ex Military(y/n) \_\_\_\_\_ Branch \_\_\_\_\_ Previous  
Formation Experience: (explain) \_\_\_\_\_ If formation  
experienced, what level do you consider yourself? Please check one: Beginner( ) Intermediate( )  
Advanced ( ). If you are already FAST qualified, please list your rating: Wing( ) Lead( ) Check  
Pilot( ). If not fast rated but experienced, please elaborate: \_\_\_\_\_

Please List A/C owned or that are available to you that are suitable for formation flying.

A/C #1 \_\_\_\_\_ N# \_\_\_\_\_  
A/C #2 \_\_\_\_\_ N# \_\_\_\_\_  
A/C #3 \_\_\_\_\_ N# \_\_\_\_\_

Do you presently belong to a CAF Wing, Squadron or Detachment (y/n)-

If yes, which one? \_\_\_\_\_

Traron Dues: January to January of any given year: \$25.00 Mail To:

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