



Gruppo Aerostatico Ticino

I hereby wish to join the “Gruppo Aerostatico Ticino”.

SECTION A

First Name: _____ Name: _____
Street / n° _____ Zip - City: _____
Phone: _____ Mobile: _____
Mail: _____
Date/Location: _____ Firma: _____

SECTION B (mark your desired proposal with a cross)

Proposal **1** - I want to become an active member of GAT.

Mandatory:	AéCS	<input checked="" type="checkbox"/>	AéCL	<input checked="" type="checkbox"/>	GAT	<input checked="" type="checkbox"/>	
	CHF 74.-		CHF 15.-		CHF 50.-		Total CHF: 139.-

Proposal **2** - I want to become a passive member of GAT.

Mandatory:	AéCL	<input checked="" type="checkbox"/>	GAT	<input checked="" type="checkbox"/>		
	CHF 15.-		CHF 50.-			Total CHF: 65.-

Proposal **3** - I want to become a supporting member of GAT.

Mandatory:	GAT	<input checked="" type="checkbox"/>		Your donation
Minimum	CHF 35-		Total CHF:	

Important: Please let us know if you are already a member of the following associations:

AéCS
Aero Club de Suisse

AéCL
Aero Club Lugano

SBF
Swiss Ballooning Federation

Once we have received your registration, we will send you the payment details, according to your registration details.

Once completed, send it to info@gruppoaerostatico.ch