



Gruppo Aerostatico Ticino

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

SECTION A

First Name: _____ Name: _____
Street / n° _____ Zip - City: _____
Date of Birth: _____ 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 AéCL GAT
CHF 74.- CHF 15.- CHF 60.- Total CHF: 149.-

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

Mandatory: AéCL GAT
CHF 15.- CHF 60.- Total CHF: 75.-

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

Mandatory: GAT Your donation
Minimum CHF 40- 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.