Spartan Wings, Inc.
Membership Application (Part 2, Financial Information)

Full Name: _____

Address: _____

City, State, Zip Code: _____

Telephone – Home:_____Work:_____

Cell Phone: _____

E-mail Address: _____

Notice of Interest Charges

I understand that any indebtedness to the Corporation at the end of a billing period, is subject to interest charges of 18% annually (or 1.5% monthly) on that said balance. I agree to pay these interest charges. If a credit card number is on file and payments are approved when submitted, then no interest charges will occur.

I also understand that monthly dues are charged and paid at the beginning of each month. I agree that I am not eligible to use an aircraft until such dues are paid.

Signature:_____Date:_____

Spartan Wings, Inc. has the capability to accept MasterCard and Visa credit cards as payment for monthly dues and aircraft rental. All members are encouraged to have a credit card on file. By providing this information it enables you to charge aircraft rental to your credit card. This option can be exercised by checking the appropriate boxes on the aircraft rental slip. Please check the desired boxes below.

- ❑ I authorize my credit card to be charged monthly for my membership dues.
- ❑ To remain in good standing, I authorize my credit card to be charged the balance owed to prevent my account from becoming past due.

MasterCard / Visa (circle one)

Account Number:

Expiration Date (mm/yy)

Signature:_____Date:_____

(This section is required only if you do not wish to put a credit card number on file)

I hereby give permission to Spartan Wings, Inc. to perform a credit check.

Signature:_____ Date:_____

SSN:_____