***EAST VALLEY AVIATORS, Inc.***

# Student Pilot Enrollment Form

**Student Pilots:**

Please fill out the information below and send to the EVA Training Officer listed at the bottom of the page. You must be an EVA member and have a current AMA card to participate in our training program. Feel free to contact the Training Officer to discuss any questions you may have. The EVA Training Officer, upon receiving your enrollment form, will call or email your Instructor contact information. Please have your AMA and EVA badge with you when you meet with your Instructor at the field.

## Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EVA # \_\_\_\_\_\_\_\_\_\_\_ AMA # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Radio Equipment** (Brand , Model, Channel #): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Aircraft Type** (Brand, Model, new/used): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Requested time for instruction** (e.g. Mon-Wed. morning, Sat. only, be specific): \_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Does your aircraft need a preflight inspection?** (required if never flown): \_\_\_\_\_\_\_\_\_\_

**What is your current ability?** (e.g. never flown; can’t land, be specific): \_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please send to:**

**John Mitchell, EVA Training Coordinator**

**Nov. thru April**

**3533 N. Val Vista Rd.**

**Apache Junction, AZ 85119**

Phone (360) 582-9980 email: [jmmitch@olypen.com](mailto:jmmitch@olypen.com)

**May thru Oct.**

**196 Jamestown Rd.**

**Sequim, WA 98382**

Phone (360) 582-9980 email: jmmitch@olypen.com

*Revised: Nov. 2012*