

Checks payable to: The Grey Eagles
Send checks to the Membership Chairman:
Captain Roger Hill
2801 Rockport Cove
Grapevine, Texas 76051
817-329-0336 rhhill1@earthlink.net



FOR OFFICE USE

Assigned GE#: _____ Photo: _____
Base: _____
Type (3.2, 3.3, 3.0, AUX) _____

APPLICATION FOR MEMBERSHIP

(Please type or print) (Rev.9/1/2013 – Previous revisions are obsolete)

Regular Membership is limited to active American Airlines pilots who are over the age of 50, and retired pilots who flew as a scheduled airline pilot for American Airlines or any of its incorporated companies; and was normally or medically retired. **Fee: \$400 with initial application (paid in full) or \$200 with initial application and \$100/year for 2 years.**

Auxiliary Membership is available to widows/widowers of individuals who could have qualified as regular members for a **one-time fee of \$100.**

Name _____ / _____ / _____ Nickname _____
(Last) (First) (Middle)

Employee # _____ Spouse's Name _____

Street Address _____

City _____ State _____ Zip Code _____ - _____

Telephone # _____ E-mail _____

Second Address [_____] _____
Effective dates

City _____ State _____ Zip Code _____ - _____

Second Address Phone # _____ Secondary E-mail _____

Date of Birth: Month _____ Day _____ Year _____ Last/Current Base _____

Retirement Date (if retired) _____ (Normal ____ Early (prior to age 65) ____ Medical ____)

Date of first employment with AAL or predecessor company _____

If not AAL, name of predecessor company _____

Check here if this is an application for Auxiliary membership (widow/widower of a non-member)

CC Information:

Print name on card Exp. Date

Card number 3 digit security code

Your Signature

Date