

# PEDRO RESCUE HELICOPTER ASSOCIATION

## Membership Application

Association Dues are \$10.00 a year and are tax deductible. If you would like to join the association, please complete the form below. Required information is noted with an (\*) asterisk.

Please send your check to:

Pedro Rescue Helicopter Association  
8398 Kearney Rd.  
Eveleth, MN 55734-8600

Please ensure that your check is made out to the "Pedro Rescue Helicopter Association".

Please provide the following contact information:

\*First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

\*Last Name: \_\_\_\_\_ Title: \_\_\_\_\_

Spouse's Name (if applicable): \_\_\_\_\_

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

Address 2 (P.O. Box, etc.): \_\_\_\_\_

\*City: \_\_\_\_\_

\*State/Province: \_\_\_\_\_

\*Zip/Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

FAX: \_\_\_\_\_

E-mail: \_\_\_\_\_

Personal Web Site Name & URL: \_\_\_\_\_

\* May your contact information be supplied to other Pedro Rescue Helicopter Association members? Yes \_\_\_\_\_ No \_\_\_\_\_

