



Regular Membership Application

1635 Prince Street, Alexandria, Virginia 22314
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www.rotor.com

Office Use Only

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updated 02/18/11

Regular Members: Operators of helicopters. Any entity which has control over, is responsible for, and operates one or more helicopters.

Company Name

Address

City / State / Zip or Postal code

Country

Phone / Fax

Web site

Number of employees

How did you hear about HAI?

You may list up to five contacts to appear in the *Helicopter Annual*[®]. Contacts will receive *ROTOR*[®] magazine and *RotorNews*[®].

MEMBERSHIP REPRESENTATIVE

1. Mr. Ms. Dr. Name / Position in Company

E-mail

OTHER CONTACTS

2. Name / Position in Company

E-mail

3. Name / Position in Company

E-mail

4. Name / Position in Company

E-mail

5. Name / Position in Company

E-mail

Please note: HAI respects your contact information. Your phone, fax, and e-mail address will be used for HAI business only.

Regular Membership Classification

- Commercial: Operators of helicopters for commercial purposes as a principal business
- Corporate/Private: Operators of helicopters as a business aid or for private use
- Government Service: Operators of helicopters for Federal, state, or municipal government agencies or entities

Fleet Information: Include helicopter(s) Make, Model, and Tail Number (ex. Bell 206 / N1234)

Operations Information: Please check the categories that best describe your company's current activities and services. This information will be listed in the *Helicopter Annual*® and on www.rotor.com.

- | | | |
|---|---|--|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> External Cargo (Part 133) | <input type="checkbox"/> Logging |
| <input type="checkbox"/> Air Carrier (Part 127) | <input type="checkbox"/> Flight School | <input type="checkbox"/> Offshore |
| <input type="checkbox"/> Air Taxi/Charter (Part 135) | <input type="checkbox"/> Flight School (part 141) | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Commuter/Scheduled | <input type="checkbox"/> Fire Control/Support | <input type="checkbox"/> Private Owner/Personal Use |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Forestry | <input type="checkbox"/> Sightseeing |
| <input type="checkbox"/> Corporate/Not for Hire (Part 91) | <input type="checkbox"/> Government Agency/Not for Hire | <input type="checkbox"/> Skiing |
| <input type="checkbox"/> Electronic News Gathering | <input type="checkbox"/> Government Contracting | <input type="checkbox"/> Traffic Surveillance |
| <input type="checkbox"/> EMS/Air Ambulance | <input type="checkbox"/> Herding (Stock/Wildlife) | <input type="checkbox"/> Utilities Patrol & Construction |
| <input type="checkbox"/> Executive Transport | <input type="checkbox"/> Law Enforcement/For Hire | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Exploration | <input type="checkbox"/> Law Enforcement/Not for Hire | |

Dues: Membership dues are based on the number of helicopters operated. The membership year runs from July 1 through June 30. New members pay a full year's dues when joining. If you join during the fiscal year, a credit will be applied to the next year's dues. HAI dues are not refundable. HAI dues are not deductible as a charitable contribution for tax purposes, but 95% are deductible as a business expense.

Description of Services (300 characters including spaces):

<input type="checkbox"/> 1 \$300	<input type="checkbox"/> 26 - 30 \$1600
<input type="checkbox"/> 2 \$450	<input type="checkbox"/> 31 - 35 \$1800
<input type="checkbox"/> 3 - 5 \$600	<input type="checkbox"/> 36 - 40 \$2000
<input type="checkbox"/> 6 - 10 \$800	<input type="checkbox"/> 41 - 45 \$2200
<input type="checkbox"/> 11 - 15 \$1000	<input type="checkbox"/> 46 - 50 \$2400
<input type="checkbox"/> 16 - 20 \$1200	<input type="checkbox"/> 51 + \$2600
<input type="checkbox"/> 21 - 25 \$1400	

Payment

Annual Dues _____

Method of Payment

- Check, in U.S. Dollars Visa/MasterCard/American Express/Discover

Postage Surcharge* _____

Account # _____ Exp. Date _____

Total _____

Cardholder _____

* A postage surcharge of \$25 applies to all members outside the United States.

Signature _____

I hereby certify that the information contained in this application is true to the best of my knowledge. My company and its employees agree to abide by the HAI Code of Ethics as put forth in the HAI Bylaws, and listed on the HAI Web site and in the membership brochure.

Signature _____

Date _____