



Discover Aviation Center
Lorain County Regional Airport 44050 Russia Rd, Unit 6 Elyria, OH 44035
www.discoveraviationcenter.org



Discover Aviation Center Flying Club (DACFC) Membership Application and Agreement

Section I – Terms of Agreement

I, _____ hereby apply for membership in the Discover Aviation Center Flying Club. I agree to these terms and conditions of membership:

1. I understand that the Discover Aviation Center Flying Club (DACFC) is a 501c7 nonprofit social organization. Its purpose is to encourage flying practice and safety among its members.
2. I understand that the DACFC is a non-equity flying club meaning members do not have a financial share in the aircraft; rather, they pay to become a member of a club that owns or leases the aircraft
3. I will abide by the provisions of the Bylaws and Operating Rules of the DACFC and any other rules, regulations, and directives that may from time-to-time be revised by the Club Leadership or the Membership.
4. I will submit the required membership fee of \$500 and one month's dues of \$100 or \$50 where applicable. I understand that the membership fee is refundable after 12 months of active membership upon my acceptance into the Club and will not be refunded if I leave the club before 12 months of active membership.
5. I will pay the monthly DACFC billing, within 30 days after receipt, by check, money order or electronic deposit. Unpaid balances after 60 days are subject to a 1.5% finance charge. I understand that failure to pay as agreed may result in loss of flying privileges, claims judgment, and payment of collection fees.
6. I will pay for the use of club aircraft at "wet" rates established by the DACFC. I understand that, upon submission of receipts, my account will be credited for fuel and oil that I purchase while away from Lorain County Regional Airport. I will not be reimbursed for other expenses including hangar, de-icing, landing, and parking fees that I incur.
7. I understand the risk associated with the spread of infection and will follow CDC and DACFC guidance to minimize exposure to myself and other members. I will not hold DAC, DACFC or any members liable for any illness that may occur in and or around DAC and DACFC property including aircraft.
8. I will obtain a proficiency check ride in the highest type aircraft that I intend to fly with a DACFC designated instructor upon acceptance into the Club. I will also be required to attend annual DACFC flight training, complete three FAA Wings knowledge credits every 12 months and take an Annual FAA WINGS Flight Review we will refer to as Continual Qualification (CQ) at least once within any 12-month period unless in an approved part 91, 121 or 135 flight training program. Failure to do so will result in the loss of my flying privileges until this requirement is met.
9. I may become an inactive member by submitting a written (or email) request to the DACFC finance director, provided my account is paid in full. Dues will be suspended while I am inactive. I can be reinstated by paying the current reactivation fee and obtaining a new proficiency check ride if required.



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Notice of Insurance Coverage:

As a renter of aircraft, you are hereby notified that:

- (1) You ARE insured under a policy or policies of insurance provided by the Discover Aviation Center Flying Club and providing liability coverage to renters of aircraft in the following amounts of:

LIABILITY FOR SCHEDULED AIRCRAFT

Combined Single Limit (CSL) Each Occurrence: \$1,000,000.

Each Passenger: \$100,000.

Provides liability coverage for scheduled aircraft.

LIABILITY FOR TEMPORARY SUBSTITUTE AIRCRAFT

Combined Single Limit (CSL) Each Occurrence: \$1,000,000.

Each Passenger: \$100,000.

Extends liability coverage to apply with respect to the use, by or on behalf of the Named Insured of any other aircraft not owned in whole or in part by the Named Insured, while temporarily used as a substitute aircraft.

STUDENT AND RENTER PILOT LIABILITY

Each Occurrence Limit: \$100,000.

- (2) Hull insurance in favor of renters of aircraft IS maintained. You ARE insured for the full value of the rental aircraft.

Cessna P172D Skyhawk	\$90,000
Piper Tomahawk	\$35,000
Piper Archer	\$100,000

Signed by: *Paul Kozial*
Membership Director

Dated: January 1st, 2024

I have read the forgoing Terms of Agreement and the written notice of Insurance Coverage and I agree to be bound by them. I further certify that the statements I have given on this application hereof are true and correct.

Signature _____ Date _____



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Section II – Personal Data

Name _____ Cell Phone _____

Address _____ Date of Birth _____

_____ Citizenship _____

City _____ State _____ Zip _____

Email address _____

In Case of Emergency Notify:

Name _____ Phone _____

Address _____



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Section III – Aeronautical Background and Experience

FAA Certificate Number _____ Date of Issue _____

Check all that apply:

Student Pilot ___ Private Pilot ___ Instrument Pilot ___ Commercial Pilot ___ ATP ___

Other licenses and ratings _____

Medical Certificate: Class ___ Date of Issue _____ Limitations _____

Flight Hours: Total _____ PIC _____ X-Country _____ Instrument _____ Night _____

In last 6 months: Total _____ PIC _____ X-Country _____ Instrument _____ Night _____

Date of last Flight Review _____ WINGS Level achieved _____

Have you been (check all that apply)?

In any aircraft accidents or incidents ___ Y ___ N

Charged with violation of FAA regulations ___ Y ___ N

In any motor vehicle accidents in past 3 years ___ Y ___ N

Issued moving traffic citations in past 3 years ___ Y ___ N

Treated for alcoholism or drugs ___ Y ___ N

If you checked "Y" on any of the preceding questions, please explain details below.
