

75 rue Albert Street, Suite 903 Ottawa, ON K1P 5E7 Tel: 613.236.4901 | Fax: 613.236.8646

COPA Flight Application Form

COPA FIIgII	t Application Form
	Date:
This form can be used to apply to become a new COPA Flight. Once completed, please send this fo	COPA Flight chapter or to reactivate an existing expired orm to copa@copanational.org .
We, the undersigned COPA members, ask the Ca recognize or reaffirm our group as a COPA Flight	nnadian Owners and Pilots Association to formally , organized in accordance with COPA Policy,
in	on
Municipality, Province	(day/month/year)
Flight Number:	
	the Flight number or if you are applying to become a
COPA Flight, COPA will assign you a Flight numbe	er)
Flight Name:	
Note:	

10 signatures of COPA members in good standing are required to form or renew a Flight. See COPA Policy No. 10.

	COPA Membership No.	Name	Position	Signature (provide at least 10)
1			Captain	
2			Co-Captain	
3			Navigator	
4			Treasurer	
Add	ditional COPA m	nembers		Signature (provide at least 10)
We	strongly encou	rage all COPA Flight members	to be COPA memb	ers.
5				
6				
7				



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8		
9		
10		

How many members are in this flight:	How many are active COPA members:
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Additional Information

Please note, the following information will appear on the COPA Flight webpage at copanational.org

Contact Person	This can be the COPA Flight Captain or the executive who is the main point of contact for inquiries
Flight's Email Address	COPA Flights are encouraged to create a general e-mail specific to their flight
Flight's Telephone Number	
Flight's Mailing Address	
Website (if applicable)	
COPA Discover Aviation Event Contact Person (if any)	
COPA Discover Aviation Event Contact E-mail Address (if any)	
Monthly meetings	Please indicate the dates, time and location of reoccurring monthly meetings
Upcoming Events	Please indicate the dates, time and location of any upcoming events