

# Aero-Sports

Self Employed Model Aviation Instructor

## Application Form

Date: \_\_\_\_\_

Legal Name: \_\_\_\_\_

Address: \_\_\_\_\_

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Contact Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_



Family Background:

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2 References:

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Education:

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Experience:

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City/Town of Franchise Location:

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Payment Details:

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Do You Have Any Prior Experience/Knowledge of Aero-modeling?

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Have you visited our corporate website and spoken to the Aero-Sports office before making this decision?

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