



Colorado Pilots Association 2020 Fly-in Registration Form

First Name			Last Name		
Are you a CPA Member?	Yes		No		
Address:					
Cell Phone:					
Email:					
Emergency Contact and phone:					
Aircraft type and N#:					
Do you have a seat to share on your plane?	Yes		No		
Are you in need of an airplane ride?	Yes		No		
Do you have any guests joining you?	Yes		No		
If so, how many?					
Please include their names:					
Which event are you registering for?	Carlsbad New Mexico				

Please find the total from the Fly-in event you registered for online and send in the total payment % Colorado Pilots Association to:

Bob Sewart
 60370 E 104th Ave
 Strasburg CO 80136-8715