The Youth Aeronautics Educational Foundation



1000 Airport Rd.., Mattaponi, VA 23110

Website: www.yaefwings.org

yaefwings@gmail.com 908-397-9059

SEND COMPLETED APPLICATION TO:

Youth Aeronautics Educational Aviation Program 138 John Pott Drive Williamsburg, Virginia 23188

Attn: Mr. Samuel Billings Executive Director

INSTRUCTIONS AND GENERAL INFORMATION

<u>Instructions for Submitting Application:</u>

Complete and sign the attached application forms and return to the above address with a *\$150.00 application fee.

Application Fee

Please indicate which program you want to join:

() Aviation Flight	\$150.00
() Build-A-Plane	\$100.00
() Drone Program – Hampton	\$50.00
() Drone Program – West Point	\$50.00

The following must be submitted with the application:

- 1. Copy of most current report card.
- 2. Two letters supporting the character, achievements, and potential for the aviation program. One letter must come from a school (principal, counselor, teacher, etc) or a community agency such as Boy Scouts of America, etc.

The other letter may be from a minister, coach, employer or any person with significant knowledge of the applicant.

- 3. A composition of at least two paragraphs explaining:
 - a. Why you desire to become a part of our flight/build-a-plane or drone program?

YOUTH AERONAUTICS EDUCATIONAL FOUNDATION PROGRAM

SCHOLASTIC STATUS INFORMATION

STUDENT NAME:			
SCHOOL PRESENT	CLY ATTENDING:		
SCHOOL ADDRES	S:		
DOB:	PARENT E-MAIL:		
GRADE LEVEL	SCHOOL YEAR	ACADEMIC A	AVERAGE
ATTACH A	A COPY OF YOUR MOS	ST CURRENT REI	PORT CARD
	LAR ACTIVITIES/HOBB	`	,
GOALS FOR THE N	NEXT SIX MONTHS		
Parent/Guardian's Sig	gnature:		Date:
Student's Signature:			Date:

YOUTH AERONAUTICS EDUCATIONAL FOUNDATION PROGRAM

PARENT/GUARDIAN PARTICIPATION FORM

I,		Parent/Guardian of			
	Address:				
Telephone: (Home)	(Work):				
(Cell)	E.Mail:				
1. Agree to volunteer d	uring my child's participation in	the Youth Aviation Program			
	am obligated to volunteer my time and give a donation that is required for that				
 Students must be proposted later. Waiver 	I				
Skill	Availability	Telephone #			
Parent/Guardian's Signatu	ıre:	Date:			