



## AEROSCHOLARS COURSE PURCHASE FORM

**Student Information (Fillable PDF) For multiple student purchases, provide primary contact.**

Student Name: \_\_\_\_\_ Age : \_\_\_\_ Date: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Parent / Guardian: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**School or organization name:** \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

School Contact: \_\_\_\_\_ Email: \_\_\_\_\_

Check all that apply:

12<sup>th</sup> Grade  
11<sup>th</sup> Grade  
10<sup>th</sup> Grade  
Other \_\_\_\_\_

Private School  
Public School  
Home School  
Other \_\_\_\_\_

Male  
Female

Check all that apply

		Number of Students
Course 1: Fundamentals of Aviation Science (2)	\$295	_____
Course 2: Advanced Aviation Science, Private Pilot (3cr)	\$295	_____
Course 2: Materials: (per student – needed to complete course)	\$50	_____
Course 3: Drones: Remote Pilot Certification	\$295	_____

Purchase Total: \$ \_\_\_\_\_

Check one of the following:

Spring semester (January -June)  
Summer semester (June-September)  
Fall semester (September-January)

Year: \_\_\_\_\_

Refer to the web site  
[www.AeroScholars.com](http://www.AeroScholars.com)  
for exact semester dates

Charge my:        

\_\_\_\_\_

Name on card: \_\_\_\_\_

Email receipt to: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Expire date: \_\_\_\_ / \_\_\_\_ Card Security Code: \_\_\_\_\_  
MONTH YEAR

Signature: \_\_\_\_\_

**Fax form to: 801-616-3911**

Make Checks payable to: "AeroScholars"

Mail payment, along with this form to:

**AeroScholars Registration  
PO Box 634  
Oshkosh, WI 54903-0634**