



**NATA AVIATION LEGAL SERVICES PLAN™**  
ADMINISTERED BY AVIATION LEGAL SERVICES, LLC

AGREEMENT FOR MEMBERSHIP  
IN THE  
NATA AVIATION LEGAL SERVICES PLAN™

**THIS AGREEMENT** MADE AND ENTERED INTO THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 201\_\_\_\_, BY AND BETWEEN AVIATION LEGAL SERVICES, LLC (HEREINAFTER REFERRED TO AS “ALS”), AS ADMINISTRATOR OF THE NATA AVIATION LEGAL SERVICES PLAN™, (HEREINAFTER REFERRED TO AS THE “*PLAN*”), THE AVIATION LAW FIRM (HEREINAFTER REFERRED TO AS THE “FIRM”), AS PROVIDER OF LEGAL SERVICES UNDER THE *PLAN*, AND \_\_\_\_\_ (HEREINAFTER REFERRED TO AS THE “*MEMBER*”), FOR MEMBERSHIP IN THE *PLAN* (COLLECTIVELY REFERRED TO AS “THE PARTIES”).

THE PURPOSE OF THIS AGREEMENT IS TO EXPLAIN, IN WRITING, THE FINANCIAL AND OTHER RIGHTS AND RESPONSIBILITIES OF THE *MEMBER*, ALS, AND THE FIRM, AS PROVIDER OF SERVICES SPECIFIED IN THE *PLAN*. THIS AGREEMENT, ALONG WITH PLAN DESCRIPTION, TERMS, AND CONDITIONS FULLY EXPLAINS THE RIGHTS AND RESPONSIBILITIES OF THE PARTIES.

IF YOU HAVE ANY QUESTIONS OR CONCERNS ABOUT THIS AGREEMENT OR THE PLAN DESCRIPTION, TERMS, AND CONDITIONS (HEREINAFTER REFERRED TO COLLECTIVELY AS “THE DOCUMENTS”), PLEASE NOTIFY ALS BEFORE SIGNING THE DOCUMENTS. ONCE YOU SIGN THE DOCUMENTS, ALS AND THE FIRM HAVE THE RIGHT TO ASSUME THAT YOU READ THE DOCUMENTS, UNDERSTAND THEM, AND AGREE TO THEIR TERMS.

THE FIRM WILL NOT PERFORM ANY WORK FOR THE MEMBER AND NO ATTORNEY-CLIENT RELATIONSHIP WILL BE ESTABLISHED UNTIL YOU HAVE SIGNED AND RETURNED THIS AGREEMENT AND THE PLAN DESCRIPTION, TERMS, AND CONDITIONS TO ALS, ALONG WITH YOUR MEMBERSHIP PAYMENT.

**PERIOD OF PERFORMANCE**

THE TERM OF THIS AGREEMENT SHALL COMMENCE IMMEDIATELY UPON RECEIPT OF A SIGNED COPY OF AGREEMENT AND THE PLAN DESCRIPTION, TERMS, AND CONDITIONS. THE *PLAN* BENEFITS WILL TERMINATE ONE YEAR (I.E., 12 MONTHS) FROM THE ABOVE DATE, UNLESS OTHERWISE RENEWED FOR AN ADDITIONAL 12-MONTH PERIOD.

## FEES

AS FULL AND COMPLETE COMPENSATION FOR THE SERVICES PROVIDED AS SPECIFIED IN THE PLAN DESCRIPTION, TERMS, AND CONDITIONS, THE *MEMBER* WILL PAY ALS (AS ADMINISTRATOR OF THE *PLAN*), BASED ON THE FOLLOWING *PLAN* LEVEL SELECTED:

|                |                     |
|----------------|---------------------|
| BASIC LEVEL    | \$2,500.00 PER YEAR |
| PLUS LEVEL     | \$3,375.00 PER YEAR |
| ULTIMATE LEVEL | \$5,000.00 PER YEAR |

## MEMBER RIGHTS AND REPONSIBILITIES

### THE MEMBER HAS THE RIGHT TO:

THE BENEFITS AS SPECIFIED IN THE PLAN DESCRIPTION, TERMS, AND CONDITIONS BASED UPON THE *MEMBER'S* SELECTED *PLAN* LEVEL OF COVERAGE, DILIGENT REPRESENTATION BY THE AVIATION LAW FIRM, AND TO BE KEPT INFORMED REGARDING THE PROGRESS OF THE *MEMBER'S* MATTERS.

DECIDE WHETHER TO ACCEPT OR REJECT ANY OFFERS OF SETTLEMENT OR EVALUATIONS OF THE MATTER, AND THE *FIRM* SHALL ABIDE BY THE *MEMBER'S* DECISION.

CONFIDENTIALITY OF INFORMATION ABOUT THE *MEMBER* UNLESS THE *MEMBER* PROVIDES EXPRESS CONSENT FOR DISCLOSURE OF SUCH INFORMATION.

### THE MEMBER HAS THE RESPONSIBILITY TO:

NOT EXPECT THE *FIRM* TO GUARANTEE A PARTICULAR OUTCOME OF THE *MEMBER'S* MATTERS.

BE TRUTHFUL IN ALL DISCUSSIONS WITH THE *FIRM*, EVEN IF, AND ESPECIALLY WHEN, THE *MEMBER* THINKS THE INFORMATION IS DETRIMENTAL TO THE CASE.

PROVIDE THE *FIRM* WITH ANY SIGNIFICANT CHANGE OF CIRCUMSTANCES IN THE *MEMBER'S* BUSINESS IN A TIMELY MANNER.

PROVIDE THE *FIRM* WITH NAMES OF ALL PERSONS IN *MEMBER'S* EMPLOY (PILOTS, MECHANICS, ETC.) THAT COULD AND/OR WOULD BE AFFECTED BY THE COVERED SERVICES AS LISTED IN THE *PLAN* DESCRIPTION.

## TERMINATION OF SERVICES

THE *MEMBER* UNDERSTANDS THAT IF PAYMENT FOR MEMBERSHIP IS NOT RECEIVED BY THE PAYMENT DUE DATE, THE *PLAN* WILL BE CANCELLED IMMEDIATELY AND ANY REMAINING LEGAL SERVICE HOURS OR *PLAN* BENEFITS WILL NO LONGER BE AVAILABLE FOR USE BY THE *MEMBER*.

THE *MEMBER* FURTHER UNDERSTANDS THAT THE *PLAN* TERM IS FOR ONE YEAR, WHETHER A COVERED EVENT OCCURS OR NOT, AND THAT THE COST OF MEMBERSHIP IS NON-REFUNDABLE. THE *MEMBER* ALSO UNDERSTANDS THAT AT THE END OF THE *PLAN* YEAR, IF THE *MEMBER* RENEWS ITS MEMBERSHIP, ANY AND ALL LEGAL SERVICE HOURS NOT USED FROM THE PRIOR MEMBERSHIP YEAR WILL CARRY OVER TO THE NEXT YEAR FOR A MAXIMUM ACCUMULATION OF THREE CONSECUTIVE YEARS (HEREINAFTER REFERRED TO AS "ROLL-OVER HOURS"). HOWEVER, IF PAYMENT FOR THE *PLAN* RENEWAL IS NOT RECEIVED WITHIN FIVE (5) DAYS OF THE TERMINATION DATE, THE *PLAN* WILL BE CANCELLED AT THAT TIME AND ALL REMAINING ROLL-OVER HOURS WILL NO LONGER BE AVAILABLE FOR USE BY THE *MEMBER*.

**THE *MEMBER* ACKNOWLEDGES THAT IT HAS READ THIS AGREEMENT AND THE PLAN DESCRIPTION, TERMS, AND CONDITIONS, UNDERSTANDS THE CONTENTS OF BOTH, AND HAS RECEIVED A COPY OF BOTH.**

READ AND ACKNOWLEDGED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 201\_\_.

By: \_\_\_\_\_  
GREGORY S. WINTON, ESQ.  
PRESIDENT OF THE AVIATION LAW FIRM  
(PROVIDER OF SERVICES UNDER THE *PLAN*)

By: \_\_\_\_\_  
CHIEF EXECUTIVE OFFICER OF AVIATION LEGAL SERVICES, LLC  
(ADMINISTRATOR THE *NATA AVIATION LEGAL SERVICES PLAN*<sup>TM</sup>)

By: \_\_\_\_\_  
*MEMBER*  
AS \_\_\_\_\_ OF  
(TITLE)  
\_\_\_\_\_  
(COMPANY)

**MEMBER INFORMATION:**

NAME: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

\_\_\_\_\_

DAYTIME PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

PREFERRED WAY TO REACH ME: \_\_\_\_\_

PLAN LEVEL CHOSEN: \_\_\_\_\_

EMPLOYEES (AS INDICATED ON PAGE 2)    JOB TITLE

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ADDITIONAL EMPLOYEES AND JOB TITLES (IF NEEDED)

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