

BRITISH GLIDING ASSOCIATION

APPLICATION TO ENTER THE BRITISH JUNIOR NATIONAL CHAMPIONSHIPS 2010

NAME:..... EMAIL:

DATE OF BIRTH: TERM ADDRESS:

HOME ADDRESS:.....

..... TERM DATES:

TEL (HOME): GLIDING CLUB:

TEL (MOBILE):

OTHER SITES FLOWN FROM:

.....

FLYING EXPERIENCE:

Total gliding hours		Last 12 months	
No of winch launches		Last 12 months	
No of aerotows		Last 12 months	
No of x-countries	Dual		Solo
No of x-country kms	Dual		Solo
No of field landings	Dual		Solo
Types of glider in which most flying carried out			
Other flying experience			

FAI BADGES HELD:

	Date obtained
Silver (all 3 parts)	
BGA 100km Diploma Pt A	
BGA 100km Diploma Pt B	
Gold Distance	
Gold Height	
Diamond Goal	
Diamond Distance	
Diamond Height	

PREVIOUS COMPETITION EXPERIENCE (including Inter-Club League and Task Weeks):

GLIDER TYPE FOR CHAMPIONSHIP:

Glider Type:		Own / Syndicate / Club / Borrowed
If uncertain, please explain your options:		

Tick here if you would like some help to find a glider

IF YOU WISH TO SUBMIT FURTHER INFORMATION (e.g. details of noteworthy flights)
PLEASE ATTACH ON SEPARATE SHEET.

I AGREE TO BE BOUND BY THE BGA AND LOCAL REGULATIONS

SIGNED..... DATE.....

Please send complete form to the British Gliding Association, Kimberley House, Vaughan Way, Leicester, LE1 4SE by 30th April 2009. It is YOUR responsibility to ensure the form arrives at the BGA office by that date. Entries may be made after that date, but receive no priority. Correspondence about entries will be via email. To receive BGA email updates about the Juniors, sign up at www.gliding.co.uk/subscriptions. The entry list will be published approximately 4 weeks after the entry date.

SPONSOR:

Should be at least a full cat instructor/CFI/DCFI and have knowledge of the applicants flying abilities. Only required for first time entrants. Any questions should be directed at pete.masson@launch-point.co.uk

I HEREBY CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE, THE DETAILS ON THIS FORM ARE CORRECT AND THAT THE APPLICANT HAS DEMONSTRATED AN APPROPRIATE LEVEL OF AIRMANSHIP AND SAFETY AWARENESS.

NAME:..... SIGNED:.....

DATE:.....

SPONSOR'S QUALIFICATION:.....

ANY OTHER NOTES ON APPLICANT:.....

.....

SPONSOR'S ADDRESS:.....

.....

TEL: (HOME)..... (WORK):.....
