

BRITISH GLIDING ASSOCIATION

BGA CONTEST AEROBATIC BADGE APPLICATION

Please complete the form in clear block capitals using dark ink
Please use a separate form for each qualification

Payment – Please use the attached payment form. Current fees are on the BGA website
<http://www.gliding.co.uk/forms/bgafees.pdf>

Data protection notice.

On receipt, the BGA protects the personal data supplied in this application form in accordance with its data protection policies, notices and procedures. The details, including your rights in respect of your data held by us, are at <https://members.gliding.co.uk/library/data/>

1. APPLICANTS PERSONAL PARTICULARS

Applicants BGA Reference Number (if known)

Title.....Surname.....

Forenames.....Nationality.....

Date of Birth.....Place of Birth.....

Postal Address.....

.....

Post Code.....Email Address.....

Tel No.....Mobile No.....

Preferred contact method – email or letter?

BGA Club.....

3. TYPE OF CLAIM (please tick)

	Standard	Sports	Intermediate	Unlimited
Known				
Unknown				
Free				

Date of Flight.....Place.....

Glider Type.....Ident.....Launch Height.....

4. FLIGHT AUTHENTICATION (delete as appropriate)

STANDARD - I certify that a qualifying flight as defined for the BGA Standard Aerobic Badge was successfully completed by (full name).....Date

Name.....Signature.....Date.....

BGA AEROBATIC INSTRUCTOR OR EXAMINER / BAeA CHIEF JUDGE (delete as appropriate)

SPORTS - I certify that a qualifying flight as defined for the BGA Sports Aerobic Badge was successfully completed by (name)Date.....

Name.....Signature.....Date.....

INTERMEDIATE - I certify that a qualifying flight as defined for the BGA Intermediate Aerobic Badge was successfully completed by (name)Date.....

and that the k factor of.....for the sequence flown and the score achieved of.....% met or exceeded the minimum requirements for this flight.

UNLIMITED - I certify that a qualifying flight as defined for the BGA Unlimited Aerobic Badge was successfully completed by (name)Date.....

and that the k factor of.....for the sequence flown and the score achieved of.....% met or exceeded the minimum requirements for this flight.

Name.....Signature.....Date.....

BGA AEROBATIC EXAMINER / BAeA CHIEF JUDGE (delete as appropriate)

5. APPLICANTS DECLARATION

I certify that the particulars on this form are correct to the best of my knowledge and belief. I understand the privileges and limitations of the badge, and my personal responsibilities including medical fitness.

Date..... Name.....Signature.....

Instructions for the applicant

- **This completed form 1-6 together with the appropriate fee and your gliding certificate must be sent to the BGA office**
- All cheques should be made payable to the British Gliding Association and crossed

6. PAYMENT

All fees are payable in advance with the application
 Cheques must be payable to 'The British Gliding Association'

If paying by cheque, please enter the amount here £ _____

If paying by credit or debit card, please complete the following:

Card Holders Name (in full)																														
Amount in £ sterling	£																													
Card No																														
Expiry Date	__	__	/	__	__	Valid From										__	__	/	__	__										
Card Security No. (last 3 numbers)	<table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td></td><td></td><td></td> </tr> </table>																													
Address of Cardholder if different from applicant	<div style="height: 100px;"></div>																													
	Postcode:																													

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