Paragliding Application Form

| Use mouse to access fields | | | | | | | | | | | |
|--------------------------------------|---|---|--|---|---|---|--|--|--|---|---|
| Name | | | | | e-mail address | | | | | | |
| | | | | | Mobile Numb | er | | | | | |
| Address | | | | | Home Phone | | | | | | |
| | | | | | Nationality | | | | | | |
| | | | | | Date of Birth | _ | | | | | |
| Post Code | | _ | | | | _ | | | | | |
| Next of Kin Name & Tele | phone Number | | | | | | | | | | |
| COURSE | Click to select of | one of the following | g: (| Beginner-EP | | | | | | | |
| REQUIRED | | | | · · | | | Accommodation Package | | | | |
| | | No of | \cup | EP-Club Pilot | | | | | | | |
| | | days | _ | CP+ Thermalling | | | Equipmen | t | | Give w | eight |
| | | | \bigcirc | Advanced XC | | | Needed? | | | | |
| | Alternatively - c | hoose only one | | | | | Radio | | | | |
| | | No of | \bigcirc | Paragliding Holiday | | | Needed? | | | | |
| | or | days | - | (CP+10 hrs minimun | n) | | | | | | |
| | | No of days | | Day Clinic Only | | | | | | | |
| Arrival Date Saturday | Depature Da Saturday | te | Airp | oort | Time | Own Travel | | Sisteron | Arrival — | | Time |
| | Nights nmodation | Own equipment? | _ | If yes: glider, har reserve. radio | ness, | | | Rental E | quipment ight? | | Radio Rental? |
| Existing BHPA/IPPI Membership No | | Club/S Name | chool | | Chief Flyi Instructor | ng | | Your Pilo Rating | ıt | | Total No of Flights |
| ONLY FOR ACCO | | | <u> </u> | 1 | | Click to s | • | : | □ Budget | | |
| Single room | Single room with private bathroom | | L | Double/twin room with p | rivate bathroom | ate bathroom Vege | | Camp | | | |
| Self catering - single | Self catering - single Self catering - double | | | Self catering - twin | Self catering - 2 bedrooms | | ns Self cate | Self catering with swimming pool - 2 bedrooms | | | ooms |
| Payment by Internet or I | Bank Transfer (conta | act Alpine Paraglio | ling fo | r account details). 25 | % deposit, or the | e full cost | of the course if yo | ou book wi | thin 6 wee | ks of dep | oarture. |
| Do you have any specia | al requests? | | | I wil | ll be making my | own acco | mmodation/camp | ing arrang | ements | | |
| Carry out regula | associated with the spo ally fit enough.THIS IS In it to provide the highest ain and inspect all equip ar risk assessments of a th Hang gliding and Para ation with all of the inhe equipment. Whilst Alpir cognise and wish to per | ort. I accept that the f NOT A DISCLAIMER standard of training v oment to ensure safe ill training sites and w agliding Association's erent and potential d ne Paragliding endea sonally assume the a | inal de BUT A whilst e workin eather Traini angers ivours | cision rests with me, the p NN ACKNOWLEDGEMEN nsuring that risks to your s g order conditions whilst we are u ng syllabus, guidance for that are involved in avial to minimise this risk as fa ted risks. | oilot, and I am sole IT OF THE RISKS safety are kept as I using the sites for t instructors and Tection. No form of a ar as is reasonably | ly responsi ASSOCIAT ow as reas raining chnical Mar viation is w | ble for my actions ar TED WITH PARAGLI onable practicable. The nual. without risk, and injur e, it cannot be elimin | nd consider of DING AVIATOR AV | myself comp FION AND I this we: ath do occur ether. No o | petent end TS TRAIN in paragl ne should | ough to do the ING. iding, even to participate in |
| *Compulsory Field F | Please tick if you a | agree with the al | oove | statement and infor | mation | | | Γ | | | |
| *Compulsory Field A | Also that I have rea | ad and accept tl | пе со | nditions as specifie | d in the Bookir | ng Cond | itions | İ | | | |