

# SSA Sanctioned Contest Pilot Registration Online Form

SSA SC24e 09

**Thank you for registering electronically using SSA online Pilot Registration.**

You will receive an automated email from the registration system when you submit this form. But your entry is considered pending until you receive an official confirmation email directly from contest organizers. **Official confirmation must come from the contest organizer.**



## CONTEST INFORMATION

<b>Contest Name</b>	<b>Contest Location</b> (City & State)	<b>Dates</b> (Including practice days)
<b>Entry Fee</b>	<b>Deposit</b> (submit with registration and waiver)	<b>Preferential Entry Deadline</b>

## PILOT INFORMATION

<b>SSA Member Number</b>	<b>Expiration Date</b>	<b>Full Name</b>	<b>Scoresheet First Name</b>
<b>Address</b>		<b>City, State &amp; Zip</b>	
<b>Email</b>		<b>Home Phone</b>	<b>Cell Phone</b>
<b>SSA Region in which you reside</b>			

## ADDITIONAL PILOT INFORMATION

<b>Do you hold a US FAA pilot certificate of private or better?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Pilot Certificate Number</b>	<b>US Citizen or Resident Alien?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No >	<b>If NO, list country of citizenship</b>
<b>Entry Type</b> <input type="checkbox"/> Regular <input type="checkbox"/> Guest	<b>Is this a team entry?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>If this is a team entry, name the other pilot(s):</b> (Each team pilot must complete a separate registration form)	
<b>Junior Pilot?</b> (a junior pilot is one whose 25th birthday is this year or later)	<b>Junior Pilot Birthdate</b>	<b>Contribution to US Team Fund:</b>	
		<b>Contribution to US Team Endowment Fund:</b>	

## PILOT EXPERIENCE

<b>Number of off-airport landings</b>	<b>Highest FAI Badge</b>	<b>Most recent SSA Sanctioned contest flown</b>	<b>Pilot Ranking</b>
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## AIRCRAFT INFORMATION

<b>Manufacturer</b>	<b>Model</b>	<b>Registration or 'N' number</b>	<b>Contest ID</b>
<b>Class in which you will compete</b>	<b>Colors</b>	<b>Wingspan (m)</b>	<b>Manufacturer's max gross weight (lbs)</b>
<b>Insurance Carrier</b>	<b>Policy Number</b>	<b>Policy Expiration Date</b>	<b>Are you the owner of the aircraft?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No (if NO, owner must sign below)
<b>Is this a motorized sailplane?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Will this sailplane be flown with the motor enabled?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Is this a multiplace sailplane?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Will this sailplane be shared with another contestant?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Is this sailplane ELT equipped?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Will you be flying with a satellite-linked tracking device?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		

**ADDITIONAL AIRCRAFT INFORMATION (Required for handicapped classes ONLY)**

Weight at first takeoff (aircraft, pilot and all equipment) NOT max weight > Multiplace, highest weight expected.	(lbs)	Has the wingspan changed since manufacture? <input type="checkbox"/> Yes <input type="checkbox"/> No	Any change to wingtips since manufacturer? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Was this sailplane supplied by the manufacturer with winglets? <input type="checkbox"/> Yes <input type="checkbox"/> No	Will the sailplane be flown with winglets? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Has the sailplane been fitted with non-factory turbulators? <input type="checkbox"/> Yes <input type="checkbox"/> No	Has the sailplane been fitted with non-factory wing root fairings? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Any major modifications affecting performance? <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, explain)	Sailplane Handicap (estimated)
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**CREW INFORMATION**

Name	Contest Address or Location (Motel, RV, Camping)	Cell Phone
Vehicle Make & Model	Color	Year
	State	License #

**EMERGENCY CONTACT INFORMATION**

Person to Notify	Relationship	City, State & Zip <input type="checkbox"/> On site at contest
Day Phone	Evening Phone	

**ADDITIONAL INFORMATION**

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**SIGNATURE**

I certify that the information provided on this form is complete and correct, that the sailplane described above meets all applicable regulations and that no condition exists that would prevent its legal operation in this contest. I agree to abide by all applicable Federal Aviation Regulations and current SSA Contest Rules. I will read and follow field regulations and retrieve/communication procedures.

Name of Pilot (Printed)	Date	Signature
Please sign Waiver on following page as well		Location (City & State)

**FOR OFFICIAL CONTEST USE**

<input type="checkbox"/> Pilot Certificate	<input type="checkbox"/> SSA Number	<input type="checkbox"/> Insurance	<input type="checkbox"/> Waiver	<input type="checkbox"/> Signature	<input type="checkbox"/> Entry Fee
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Pilot Ranking Score	Preference number	Completed Entry Date
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Accepted By	Date
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## WAIVER AND ASSUMPTION OF LIABILITY

Please enter me as a competitor in the \_\_\_\_\_ soaring competition to be held \_\_\_\_\_ at \_\_\_\_\_. In consideration of acceptance of this entry, I hereby intend to be legally bound, for myself, my heirs, executors, administrators, personal representatives, successors or assigns and to waive any and all right and claim for damages which I may have against \_\_\_\_\_, THE SOARING SOCIETY OF AMERICA, INC., and them and their agents, representatives, employees, successors or assigns for any and all injuries suffered by me or by any member of my crew during the aforementioned soaring competition.

I further agree to assume full responsibility for and to hold the aforementioned entities and persons free and harmless from any and all legal obligations for damages to personal property owned by, or injuries suffered by any spectator or contestant or personnel of the aforementioned entities, or by any other person or entity which may be caused directly or indirectly by competition. Provided, however, that to the extent of any valid and collectible liability insurance otherwise applicable to the participation of myself or any member of my crew in the aforementioned competition, if such insurance excludes coverage as to liability assumed by me under any contract or agreement, then, in that event and to that extent only, it is expressly understood and agreed that I assume no liability by virtue of this agreement that I would not have in the absence of this agreement. I further certify that I have read, understand, and agree to abide by the rules and regulations of the aforementioned competition.

I fully understand and agree that I am waiving any claim for damages that I may suffer by virtue of any act of negligence arising in the future by any commission or omission of any of the aforementioned entities or persons or their agents, representatives or employees, and that the consideration for this waiver is the permission by the sponsoring or presenting bodies of the aforementioned competition allowing me to compete in the said competition and that such permission is being granted me in the reliance upon this waiver as set forth in this entry form.

Name of Pilot (printed)	Date	Signature
		Location (City & State)

## SIGNATURE OF SAILPLANE OWNER

**To be completed if the pilot is not the owner of the sailplane.** I represent that I am the owner of the sailplane whose registration number is \_\_\_\_\_. I hereby accept and agree to all of the terms of the waiver above.

Name of Owner (printed)	Date	Signature
		Location (City & State)

## PERMISSION OF PARENT OR GUARDIAN

**To be completed if the pilot will be a minor on the earliest scheduled competition or practice day.** I, the parent or guardian of the above-named pilot, do hereby join with said pilot in the above waiver and do hereby certify that I have read the rules and regulations of the aforementioned competition and accept the same without reservation, and do hereby grant my permission to the aforementioned pilot to participate therein.

Name of Parent or Guardian (printed)	Date	Signature
		Location (City & State)

Thank you for entering the

**Your entry is pending.** To be considered for preferential entry, send a check for the deposit amount to the contest mailing address (below) so it is received no later than

In addition to your deposit check, contest management will appreciate your providing these documents before arriving at the contest site preferably with your entry:

- Completed and signed Pilot Registration form
- Signed Liability Waiver Form

The following must be provided prior to or during on-site contest registration. Again, contest management will appreciate your providing these documents as soon as you are able:

- Pilots License (copy of both sides)
- SSA Membership (copy of membership card)
- Insurance (copy of main policy page, showing coverage and dates)

These documents must be valid through the final scheduled day of the contest. If not available at the time you submit this form, please send copies of current documents when they become available as this will really help to make on-site registration go smoothly.

Contest Mailing Address:

Email:

Deposit Amount:  
Checks payable to:

Please carefully verify your email address:

Entry and briefing materials will be sent to this address. If in error please contact the contest organizers and update your member information with the SSA.

**PLEASE BRING A COPY OF EACH DOCUMENT WITH YOU TO THE CONTEST SITE**

We look forward to seeing you at the airport!