

# Recreational Aviation Australia Inc

ABN 40 070 931 645

3/1 Pirie Street

PO Box 1265, Fyshwick ACT 2609

Ph: (02) 6280 4700, Fax: (02) 6280 4775

Email: admin@raa.asn.au



RECREATIONAL AVIATION AUSTRALIA INC

## Waterborne Endorsement Form

### PERSONAL DETAILS (Please Print)

If submitting more than One Endorsement Form, Applicant need only complete Membership Number on subsequent Forms in Personal Details.

Pilot's Last Name			Membership Number		
Given Names					
Residential Address					
City/Suburb	State		Postcode		
Postal Address (if different)					
City/Suburb	State		Postcode		
Phone - Home	Work	Fax			
Mobile	Email				

### To be Completed by Examiner.<sup>1</sup>

- Holds Current and Valid RA-Aus Pilot Certificate, and
- Has completed such dual training as deemed necessary by the Examiner, and
- Met the required competencies as per Section 3.04 of the Operations Manual, and
- Has been trained on Group A (three Axis) floats, *or*
- Has been trained on Group A (three Axis) floating Hull, *or*
- Has been trained on Group B (weight shift) floats, *or*
- Has been trained on Group B (weight shift) floating Hull, and
- Pass a flight test with an RA-Aus Examiner <sup>1</sup>
- Entry into pilot's logbook made, signed and dated.

<b>Examiner Name</b>	<input type="text"/>	<b>Member Number</b>	<input type="text"/>
<b>Signature</b>	<input type="text"/>	<b>Date</b>	<input type="text"/>
<b>Name of Flight Training Facility</b>	<input type="text"/>		

**Note: Full Endorsement and competency requirements can be found in the Operations Manual.**

<sup>1</sup> Examiner in relation to Endorsements means Senior Instructor or above who holds the relevant Endorsement.