

Title	Mr / Mrs / Ms / Miss/ Other	Date of birth	Male / Female / Other
Last name	Given names		
Residential address			
Suburb	State	Postcode	
Postal address (if different)			
Suburb	State	Postcode	
Phone (M)	Phone (H)	Phone (B)	
Email		Occupation	
Emergency contact name (1)		Phone	
Emergency contact name (2)		Phone	

I AGREE TO THE FOLLOWING

APPLICANT'S DECLARATION

As a member of Recreational Aviation Australia I agree to abide by the Constitution and Rules of the Company. I certify that my health standard is equivalent to that required for the issue of a private motor vehicle driver's licence in Australia, and I am able to understand and carry out instructions given in the English language.

I have sought advice from an RAAus Examiner (Senior Instructor, Chief Flying Instructor, or higher approval holder) and I understand the risk involved in undertaking recreational flying training (refer to the RAAus Operations manual).

I certify that subject to the rules of RAAus there is no impediment to me holding any certificate if issued by RAAus. This application is made on the basis that there is no limitation, existing or threatened from an Authority in Australian aviation in relation to any right I have to operate an RAAus aircraft in Australia. Should that occur I accept that any licence, certificate or authority granted to me by RAAus shall automatically be equally limited.

UNDER 18 YEARS - PARENT / GUARDIAN DECLARATION

I, _____ (the parent or legal guardian of the applicant named above) declare that I am aware of and understand the risks involved in recreational flying training. I give consent for the above applicant to undertake such training. RAAus has a policy in place for working with children and vulnerable people. This policy is available on request.

Applicant's Signature

Date

Parent / Guardian Signature

Date

**This form must be lodged with the Chief Flying Instructor of your chosen
Flight Training School prior to commencing flight training.**