**WRMIC Sponsorship Request Form**

I (Print Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, USHPA# & ratings\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do hereby request to be sponsored in order to:

(choose one)

{ } (a) Conduct student Instructional flights

{ } (b) Conduct Tandem Instructional Flights

{ } (c) Conduct a weekend Instructional clinic

{ } (d) Conduct a Recreational/Instructional event (beyond 3 days)

I acknowledge that I have read, understand and I agree to be bound by the rules and guidelines set forth by the RVHPA and ~~in~~ the WRMIC. I furthermore accept that any infraction of these rules/guidelines will be grounds for disciplinary action by the RVHPA Site Preservation Committee.

Sponsoring RVHPA approved member:

I (Print Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, USHPA# & ratings\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do hereby attest to having direct knowledge of the applicants abilities and current USHPA qualifications to safely perform the above selection and take responsibility for administering a thorough “Site Orientation” prior to approving of applicant's flight operations.

Sponsor: Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant: Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_

RVHPA: { } Approved \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WMIC: { } Approved \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_