

Insurance Survey 2018

In compliance with the club's insurance carrier requirement, each member is required annually to provide the following information. Any member who fails to provide the information by the due date (November 30, 2017), will be considered inactive and will not be permitted to make flight reservations or fly as pilot in command in a club aircraft. Any such member will continue to be responsible for his monthly dues and quarterly minimum flight charges unless granted a waiver by the club officers.

Name:		Age:	
Address:			

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- 1 Do you
- A. ... hold a current FAA pilot certificate? YES ___ NO ___
- B. ... hold a current FAA medical certificate? YES ___ NO ___
- C. ... have a current BFR (biennial flight review) YES ___ NO ___

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- 2 Please confirm that your data on Schedule Master is up-to-date or will be updated:
- My data in Schedule Master about my FAA Pilot Certificate, my BFR (biennial flight review) and my FAA Medical Certificate are up-to-date (or I will update them in a timely manner) and I'll keep them up-to-date. YES ___ NO ___

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- 3 Have you within the last twelve (12) month:
- A. Had an aircraft accident, incident or unreported claim? YES ___ NO ___
- B. Had your pilot certificate or driver's license suspended, revoked or surrendered; been arrested for or charged with operating an aircraft or motor vehicle while under the influence of drugs or alcohol? YES ___ NO ___

Signature: _____

Date: ___ / ___ / ___

Please return completed form to: Alexander Kern
155 Redstone Hill Rd Apt 37
Bristol, CT 06010
alexander.kern@gmx.com