



# OPMF01 - TEMPORARY PILOT CERTIFICATE: STUDENT

PLEASE RETAIN THIS PORTION. THIS IS YOUR TEMPORARY PILOT CERTIFICATE.

<p><b>This Temporary Pilot Certificate Certifies that</b></p> <p>Students name: .....</p> <p>is a Temporary Member (Student) of the  <b>New Zealand Hang Gliding &amp; Paragliding Association Inc.</b>                  Certificate is valid from the Date Joined until <b>October 31 2009</b></p> <p>Date Joined ...../...../..... 31 / 20 09</p> <p>Instructor's Ini.....</p>	<p><b>Delegation Holder Authorisation</b></p>  <p>This Temporary Pilot Certificate is authorised by                  Ross Gray                  NZHGPA President                  2008/09</p> 
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Membership/Certificate Number:

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## OPMF02 - NEW MEMBER MEMBERSHIP APPLICATION

**Pilot Details**

First Name.....

Surname.....

Postal Address.....

City/Country.....

Date of Birth..... (dd/mm/yyyy)

Home Phone..... (.....)

Fax:..... (.....)

Work Phone..... (.....)

Email:.....

Training in:  Hang Gliding  Paragliding  Gliding  Motor Paragliding

**Student to Sign**

I have read and fully understood the Liability Waiver, pass all the requirements in the Medical Declaration and signed and dated both and agree to abide by all the constitution rules and by-laws of the New Zealand Hang Gliding and Paragliding Association Incorporated.

Signature..... Date...../...../.....

(Parent's Signature if under 16).....

Membership Fee - **\$10.00** (covers NZHGPA affiliate membership only, for up to a maximum of one year)

**Instructor to Sign**

I have witnessed the reading and signing of this form and agree to send this form with the fee to the NZHGPA(Inc) within two weeks.

Signature..... PIN #..... MemberOrg.....

Membership/Certificate Number:

**Not Renewable**

**Conditions of this Certificate (Flight By-laws):**

You, the **Student Pilot**, must carry this temporary **Pilot Certificate** with you at all times while you are engaging in flying training.

You, the **Student Pilot**, can only fly under the direct supervision of an NZHGPA.(Inc) approved instructor.

You, the **Student Pilot**, cannot fly alone or unsupervised.

You are covered by the NZHGPA's **Third Party Insurance** policy only if you are not paying for instruction or you have paid an Instructor hired by a club to teach you.

The provision of this **Temporary Pilot Certificate** in no way guarantees that you are **Fit and Proper** to be granted Permanent Pilot Certificates (**NZHGPA Ratings**). To qualify for **NZHGPA Ratings** you must first submit a **Fit and Proper Person Application** (available from your Instructor or the NZHGPA) and have this approved.

**This Training Certificate Entitles:**

You, as a **Student Pilot**, to be trained in the use of a glider and flying a Hang Glider or Paraglider.

**Liability:**

As a **Student Pilot**, you acknowledge that hang gliding and paragliding is an action air sport which can involve risk of serious injury or death.

As a **Student Pilot**, you are assuming all risks and will not hold the NZHGPA, Training School or Instructors liable in any way for injury or damage sustained while flying.

EXAMPLE ONLY

Do not use this form

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Do not use this form

**DECLARATION AND CERTIFICATE**

You must be 16 years of age and must personally sign and date this declaration and the waiver to be eligible for training.

**Full Name** .....

(Christian name)

(Surname)

1. I hereby declare that I am free from any of the following specific conditions.

- a) History of periodic disturbance of consciousness, giddiness or vertigo.
- b) Diabetes requiring insulin therapy.
- c) High Blood Pressure, chest pains or Arterial Hypertension or heart disease.
- d) Episodes of shortness of breath or asthma.
- e) Psychiatric disorder.
- f) Chronic illness.
- g) Alcoholism or drug addiction.
- h) Any condition requiring regular medication with anti-epileptics, sedatives, spasmotics, sedatives or narcotics.

2. I also declare that I do not have any other medical condition, disease or disability, or any visual defect, or take any medication, which would be likely to affect my ability to fly a glider safely.

I understand that it is my responsibility to inform the Instructor of any changes occurring which would affect this declaration.

**Signature** .....

**Date** ...../...../..... dd/mm/yy

❖ Should a medical condition exist which would disqualify a candidate from this declaration, a **Medical Examiner's Certificate** may be sought. Please contact the NZHGPA Administrator for further advice.

**Liability Waiver:** I accept Hang Gliding and Paragliding is an action air sport which can involve risk of serious injury or death and so agree to assume all the risks of injury or damage.

I release, waiver and hold blameless the New Zealand Hang Gliding and Paragliding Association, training school or instructor from all claims, losses, damage or expenses during or in conjunction with my participation in learning to fly a hang glider or paraglider including any claims caused by negligence of instructors together with any costs including legal fees that may be incurred as a result of any such claims, losses, damage or expenses whether valid or not.

**Signature** .....

**Date** ...../...../..... dd/mm/yy