



Last Name:

Pilot Information Form

Name (Last, First, Middle)

Date of Birth

Month

Day

Year

Country of Citizenship

Street Address

City, State Zip Code

Home Phone

Work Phone

Cell Phone

E-mail Address

Emergency Contact Name

Emergency Contact Phone

Medical Certificate Class

Medical Certificate Date

Pilot Certificate Number

Date of Last BFR

Check all that apply:

- Private
- Instrument
- Multi-Engine
- Commercial

- ATP
- High Performance
- Complex
- Other _____

- CFI
- CFII
- MEI

Approved Aircraft	Instructor (Sign and Print)	Date of Checkout
PA28: Warrior/Archer		
PA28R-201: Arrow		
PA34: Seneca		

Customer Agreement

I, the undersigned, hereby certify that I have received, read, understand, and agree to abide by the policies and procedures of the Tech Aviation Flight School, as set forth in the Flight School Operations Manual (FSOM). I realize that failure to comply with any of these policies and procedures may invalidate my ability to rent aircraft and/or render me personally liable for any loss, damage, judgment, or award resulting from any accident or incident in which I am involved.

Renter Signature:

Date: