

REGISTRATION FORM
FOR
GREENWOOD FORMATION CLINIC

Greenwood-Leflore Airport (GWO)

Hosted by: The Airmen, Inc.

(662) 453-5646

P.O. Drawer 1879

e-mail: vernricks@airmen.org

Greenwood, MS 38935-1879

N# _____

Type Airplane _____

Printed name: _____

Signature: _____

Mailing address: _____

City, State, Zip Code: _____

Daytime phone: _____

e-mail address: _____

FAX number: _____

*I plan to attend:(please list
dates)* _____

***(see event calendar and all other pertinent information at
website www.airmen.org)***

***(Tuesdays are arrival days, Sunday is a departure day, other
four=work days)***

*I (participant, as witnessed by my signature above) understand that I
will be required to execute a waiver to the event for any/all liability
upon my arrival.*

*Also, by means of my signature above, I certify that my aircraft is
airworthy by*

*FAA standards and that I actively have in force a minimum of \$1.0
Million of*

general, public liability insurance to protect others.

Fees: If you require active safety pilot participation in flight,
\$500.00.

[If you are n-o-t 'rated', or n-o-t current, or n-o-t other wise trained prior to this time, you require a safety pilot.]

If you are a participant, otherwise,
\$250.00.

Fees are payable in advance and are refundable up until 10 days prior to the
event.

These fees are to defer the costs of food, snacks, drinks, etc. provided to the
participant by the Event.

A portion of the fees offset the room costs for the safety pilots.

Airmen Formation Ratings are available for any airplane at GWO.

Aerobatic competency evaluations may also be performed. [Please see
www.airmen.org for details.]