

CMN Balloon Rally – Wisconsin Rapids

www.CMNBalloonrally.com

August 28, 29 & 30, 2009

Alexander Filed Airport (ISW), 3620 First St S., Wisconsin Rapids

Pilot Application (complete and return to) trir@wctc.net or mail to:
Shamaine Rustad 3731 North Valley Dr Wisconsin Rapids, WI 54494

Pilot Name: _____ Email Address: _____

Mailing Address: _____

City, State, Zip: _____

Home Phone: _____ Work or Cell Phone: _____

Shirt Size: (Circle One): Small Medium Large X-Large 2X-Large

License Information

Certificate # _____ (Circle One) Student Private Commercial

Biannual Review Date: _____ Total PIC Hours: _____

Insured by (Agency & Company) _____

Balloon Information

N#: _____ Balloon Name: _____

Manufacturer: _____ Model: _____ Year of Mfg: _____

Hotel Information

One bed or Two: _____ Smoking or Non: _____

STATEMENT OF RESPONSIBILITY

I fully accept the responsibilities legally transferred to me under the FARs in regards to my personal decision to fly my aircraft. Any bodily injury or property damage resulting from my decision is my liability. I agree that no flights are mandatory and are at my own option.

I will have in force personal aviation insurance with \$1,000,000.00 combined single limit during the event and I will provide a certificate of such insurance prior to the event. I agree not to take any passengers for rides during the event.

I agree that the function of the CMN Balloon Rally and its organizers is only to provide the facilities and means for my participation in the event and in no way supersedes my responsibility as pilot-in-command under the FARs.