## **Valley Fliers**

1402 Auburn Way North, #223 Auburn WA 98002

Date:			
First Name: Last Name:	:		
1	Yes	No	7
Do you have an effective Pilot Certificate? (not			
revoked or suspended)			Date of Last
Do you have an effective medical certificate?			
Do you satisfy the FAA's flight review requirements?			
Have you ever had an aircraft accident, incident, or			
unreported claim? (if yes please explain below)			
Have you ever had your pilot or drivers license			7
surrendered, suspended or revoked; been arrested			
for or charged with operating an aircraft or motor			
vehicle under the influence or drugs or alcohol? If yes,			
please explain below. Use additional pages if needed.			
Are you a student pilot?			
Have you ever been a partner in a flying club?			
Name of club:			
Location of club:			
Why did you leave?			
-10.4			
Flight Experience			¬
Total Flight time			_
Total Cessna 172 time			_
Total Cessna 182 time			_
Total Cherokee time			_
Hours flown last 12 months			

**Notes:**