



Student / Renter Information Form

The information you provided below is kept confidential and will not be sold.

General Information

Name First: _____ Middle: _____ Last : _____

Nickname / AKA: _____ Date of Birth: _____ Last 4 of SSN: _____

Gender: MALE / FEMALE Weight: _____ lbs.

Contact Information

Phone #: _____ Cell Phone #: _____ Are Text Messages Ok: YES / NO

Email Address: _____

Address: _____

City: _____ State: _____ Zip: _____

Emergency Contact Information

Emergency Contact Full Name: _____ Phone: _____

Email: _____ Relationship to Emergency Contact: _____

Airman Information

Airman Certificate #: _____ IACRA FTN # _____

Flight History (if any): _____

Have you ever been banned, rejected or denied flight training, services, or aircraft rental from any person, flight school, or rental company? YES / NO

Have you been involved in an aircraft incident, accident? YES / NO

If YES to either, please explain and provide contact information: _____

By signing below, you certify that the information provided is true and correct.

Signature: _____ **Date:** _____