



Aspen Flying Club
13000 East Control Tower Road
Englewood, Colorado 80112

International Pilot Record Form

Pilot Information:

Name: _____ Date of Birth: _____
 Phone Number (US Phone Only): _____ Email Address: _____
 Street: _____
 City: _____ State: _____ Zip Code: _____
 Country: _____ Nationality: _____
 Passport (Country and Number): _____ **Attach Photo Copy**

Certificates, Endorsements, and Ratings:

- Student Airline Transport Pilot ASEL Glider Inspection Authorization
- Sport English Proficient ASES Instructor Center Line Thrust
- Private Instrument Rating AMEL Power Plant Airframe Technician
- Commercial Helicopter AMES Other: _____

Type Ratings/Endorsements (specify): _____

FAA Pilot and Medical Certificate:

Airman's Certificate Number: _____ Limitations: _____
 Medical Class: _____ Issued: _____ Limitations: _____

Pilot-In-Command Aircraft Experience:

By Make/Model of Aircraft	Total Logged Hours		
	Total Hours	Last 90 Days	Last 12 Months
Hours in Aircraft model you are renting _____			
IFR			
Complex			
All Single Engine			
All Multi Engine			
All Turboprop			
All Turbo Jet			
All Helicopter			
All Seaplane/Amphib			
Glass Cockpit/G1000			
Mountain Time (Airports above 5,500' MSL)			

Total Time in all Aircraft: _____ Total Night time in all Aircraft: _____ Tailwheel Hours: _____

Date of Last FAA Flight Review: _____ Number of Mountain Landings: _____



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Expected Route of Flight (waypoints, airways, or airports)	Estimated Time En Route & Expected Arrival Date	Flight Time Running Total



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Fraud Warnings

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects that person to criminal and civil penalties (In Oregon, the aforementioned actions may constitute a fraudulent insurance act which may be a crime and may subject the person to penalties). (In New York, the civil penalty is not to exceed five thousand dollars (\$5,000) and the stated value of the claim for each such violation). (Not applicable in AL, AR, AZ, CO, DC, FL, KS, LA, ME, MD, MN, NM, OK, PR, RI, TN, VA, VT, WA and WV).

Applicable in Colorado

It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company, Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the department of regulatory agencies.

As a normal part of the Company's underwriting procedure a routine inquiry may be made which will include information concerning general information, personal characteristics and mode of living.

In the United States Public Law 91-308 (Federal Fair Credit Reporting Act) requires that if such a report is made upon your written request within a reasonable time after you receive this notice, additional information as the nature and scope of the inquiry will be provided.

You have my consent to contact pilot training facilities which I have attended for information relating to my training and I hereby expressly authorize any such pilot training facilities to release information about me.

I certify that the statements in this form are true to the best of my knowledge and belief, and I have not knowingly or intentionally concealed any pertinent information.

Pilot Signature: _____ **Date:** _____