



## Registration of rating SPHG Powered Paraglider: full qualification

Name: \_\_\_\_\_ Membership No: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone No: \_\_\_\_\_ Current Pilot Rating: \_\_\_\_\_

I certify that I have completed all the relevant tasks for the SPHG PPG full qualification. If I am successful in the examination, please issue me with an SPHG PPG full qualification.

Signed, Candidate: \_\_\_\_\_ Date: \_\_\_\_\_

### Declaration by CFI:

I confirm that (tick and complete as appropriate):

- a) The candidate is an Annual Member of the BHPA
- b) I have checked the personal logbook of the above candidate
- c) The candidate has completed all tasks for the SPHG full qualification (PPG)
- d) I support the issue of the above qualification.

Signed : \_\_\_\_\_ Name: \_\_\_\_\_  
(CFI)

Club/School: \_\_\_\_\_

### For Office Use Only:

Rec'd:

Ent'd:

Iss'd: