



**Pilot Registration Form**  
**International Vintage Sailplane Meet IVSM2016**  
**9 – 16 July, 2016 – Harris Hill Gliderport, Elmira, NY**

Contact Info: <[mary@soaringmuseum.org](mailto:mary@soaringmuseum.org)> National Soaring Museum, 51 Soaring Hill Drive,  
 Elmira, NY 14903-9204 Telephone: (607) 734-3128

Registration Fee: \$75.00 (Glider plus 1 Pilot) Additional Pilots / Crew \$40 each  
 Three options to register:

1. PayPal through the National Soaring Museum secure website: <[www.soaringmuseum.org](http://www.soaringmuseum.org)>.
2. Please bill my Credit Card # \_\_\_\_\_  
 exp date \_\_\_\_\_ Three-digit security code \_\_\_\_\_  
 Cardholder's Sig. \_\_\_\_\_  
 Name as it appears on card : \_\_\_\_\_
3. My check is enclosed (Make checks payable to National Soaring Museum)

**Pilot Information:**

Name: \_\_\_\_\_

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

City, State, & Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Home or Cell Telephone: \_\_\_\_\_

**Email:** \_\_\_\_\_

Nationality: \_\_\_\_\_

Soaring Society of America member?  yes  no VSA or NSM Member  yes  no

Number of persons in team or crew: \_\_\_\_\_

**Team or Crew:**

Names: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

**Sailplane Information:**

Model, Manufacturer & Year: \_\_\_\_\_ Number of Seats \_\_\_\_\_

Registration: \_\_\_\_\_

Are you the owner of the aircraft?  yes  no

Insurance Carrier (liability/insurance required): \_\_\_\_\_

**Camping** : Available at Harris Hill Youth Camp:  
 \$10.00 per person, per night. No.of Sites \_\_\_\_ No. Campers \_\_\_\_

Short history of your sailplane:

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I certify that the information provided on this form is complete and correct, that the sailplane described above meets all applicable regulations and that, if flown, no condition exists that would prevent its legal operation during the IVSM2016 meet. I agree to abide by all applicable Federal Aviation Regulations, Harris Hill Soaring Corp. field operation and IVSM2016 rules. I further agree to sign a Waiver and Assumption of Liability in favor of the NSM, HHSC, VSA, and the IVSM2016 organizing committee in person at registration for the event at Harris Hill. **I will bring proof of sailplane liability insurance to the meet.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_