



BRITISH SKYDIVING AUTHORISED BALLOON PILOT APPLICATION/RENEWAL/ADDITION

Part 1 PILOT'S DETAILS (Please print)

Name: _____

Licence Type: _____

Address: _____

Licence No: _____

_____ Post Code: _____

Ratings (Any other ratings): _____

Tele No(s): _____

E-mail: _____

BBAC Membership No: _____

Total Balloon Flying Hours: _____

British Skydiving No (if applicable): _____

Type(s)/Additional type(s) required: _____

Hours on Type(s): _____

I, the above named, confirm that I have read the British Skydiving Operations Manual, in particular the Flying Section (Section 9), I have understood it and agree to abide by its conditions.

Pilot's Signature: _____

Part 2 RECOMMENDATION

This can only be signed by:

- either a) A British Skydiving Category System Instructor or Team Leader, who has previously made a balloon jump.
- or b) A Balloon Pilot who has already dispatched 2 or more skydivers from a balloon.

I confirm that I have given the above-named balloon pilot ground instruction on current skydiver dropping techniques and emergency procedures. I also confirm that he/she has read and understood the guidelines contained in Form 109A. I consider him/her to be suitable for an Authorisation to drop skydivers and confirm that the details above are correct. I have checked his/her logbook(s), licence and medical certificate and certify that all are valid

Signature: _____

Name (Please print): _____

Qualification: _____

British Skydiving or BBAC No: _____

Date: _____

P.T.O.

FOR OFFICE USE ONLY

Date Authorisation/Renewal issued: _____

Authorised by: _____

Balloon types authorised: _____

British Skydiving Pilot No: _____ British Skydiving No (if applicable) _____ Valid until: _____

