

This form is used by a visiting foreign pilot who is qualified to fly gliders in his/her home country and who wishes to fly gliders as pilot in command in NZ for a period not exceeding 3 months. This form does not enable applicants to give flight instruction.

(To instruct in NZ, you must be a Full-Flying member of a GNZ affiliated club or commercial operator and hold a GNZ Instructor Rating)

Repeat visitors - a new form must be completed for each visit.

Personal Details:

First name ..... Family name ..... Date of birth dd / mm / yyyy

Address in NZ ..... Post Code .....

Email address ..... Nationality .....

Next of kin name ..... Contact phone ..... (For use in an emergency)

Dates intend to fly gliders in NZ - from dd / mm / yyyy to dd / mm / yyyy

Gliding NZ Membership Nr (if already held) .....

Gliding NZ Cross-Country Pilot Certificate (XCP) Nr (if already held) § .....

§ If a Gliding NZ XCP is not held, also complete form OPS 06 Validation of Foreign qualifications for GNZ XCP.

If your medical is not current, see MOAP Appendix 2-A for the procedure to complete form OPS 01 Medical Certificate and Declaration.

Before flying solo, you must satisfactorily complete a flight check to BFR standard with the relevant CFI or nominated instructor.

Declaration:

I hereby certify that the above information is correct ..... (Signature of pilot)

Fee:

The fees payable in respect of visiting foreign pilots wishing to fly gliders or powered gliders as pilot-in-command in NZ for a period of 3 months or less are as follows:

- a) If flying under the supervision of a GNZ Club affiliate - \$60.00 (GST inclusive).
b) If flying under the supervision of a GNZ Commercial affiliate, the affiliation fee is covered by that affiliate's charges to the pilot. (Commercial affiliates are charged a bulk affiliation fee by GNZ.)

3 payment options:

- (Tick appropriate box)
[ ] GNZ commercial operator bulk fee (no individual pilot fee applicable)
[ ] GNZ invoice to club
[ ] Direct by internet banking to Account No 02-0568-0304955-00 (Quote last name or GNZ No.)

Send this form to:

membership@gliding.co.nz (or to GNZ Central Register Manager, PO Box 284, Queenstown 9348)

For Official use only GNZ Membership Nr raised (if not currently held) .....