

This form is used by a pilot who is qualified to fly gliders in a foreign country and who wishes to have his/her qualifications recognised as equivalent to the GNZ Cross-Country Pilot certificate (XCP). Do not complete this form if you already hold a GNZ XCP.

Personal Details:

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

Address in NZ Post Code

Email address Nationality

Gliding NZ Membership Nr (if already held) §

§ If a Gliding NZ Membership is not held, also complete form ADMIN 06 Visiting Foreign Pilot Registration if you wish to fly as pilot in command in NZ for a period not exceeding 3 months. If you intend to fly for a period exceeding 3 months, you must join a GNZ Club or Commercial Affiliate as a full flying member, but you may still use this form to obtain an XCP.

Gliding Qualifications & Experience:

Licence type (if applicable) Medical valid until date / / dd mm yyyy

Solo gliding hours Total Last 90 days

Qualified in (check applicable) Aero-tow [] Winch launch [] Auto launch [] Self-launch []

Glider types flown and sites operated from in last 12 months

FAI awards achieved

Declarations:

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

I hereby certify that the pilot named above:

- 1) has successfully completed a flight check to the appropriate BFR standard and;
2) is operating under the jurisdiction of and; (Name of GNZ club or commercial operator)
3) has been assessed as qualified and experienced for the issue of a GNZ XCP Certificate, has his/her pilot's logbook endorsed accordingly, and understands that his/her gliding operations in New Zealand are under my jurisdiction as CFI.

..... (Name of CFI) (Signature) / / dd mm yyyy

CFI please copy this completed form for your own records and send the original direct to the GNZ Awards Officer. (Form may be scanned and emailed in advance, but the original must still be posted). Note that if the pilot wishes to instruct, he/she must be a full flying member of a GNZ affiliated club or commercial operator and hold a current GNZ Instructor Rating.

‡ GNZ Awards Officer, 40 Eversham Road, Mt Maunganui 3116. Email: gnzawards@xtra.co.nz

For Official use only GNZ Membership Nr verified
XCP Nr issued Date issued / / Signature