



Sport Aviation Corp Ltd

Client Renewal

Please check details below, amend as necessary and return completed form with your remittance

Personal Details

Surname: Forenames:

Address:

Phone Home: Phone Work: Fax:

Mobile: Email:

Flight Certificate Card Details

Class: Group: Client No:

Low Performance: High Performance: Passenger Rating:

Inspector: Test Pilot:

Valid From: To:

Medical Certificate

Medical Certificate Expiry Date:

Aircraft Owner Details

Aircraft make and Model:

Serial No: Registration:

Log Book Hours

Microlight: Other:

Annual Fees

Client Annual Subscription Expires:

Fee Enclosed: \$95

Signature: _____ Date: __/__/__