



# THE SOUTH AFRICAN HANG GLIDING & PARAGLIDING ASSOCIATION

Incorporating Powered Paragliding and Powered Hang Gliding

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## Temporary Membership Application: Visiting Pilot

(Valid: 2 calendar months from date of issue)

CA 62-17

<b>A</b>	<b>Type of Activity:</b>	<input type="checkbox"/> Hang Gliding	<input type="checkbox"/> Paragliding	<input type="checkbox"/> PPG / PHG
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<b>B</b>	<b>Pilot Details</b>	<b>Temp. Membership # (to be obtained from SAHPA Office):</b>
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Surname.....  
First Names.....  
Passport #:..... Postal Address.....  
..... Country:..... Post Code.....  
Date of Birth..... E-mail:..... (Fax).....  
Tel: (w) ..... (h)..... (Cell).....

<b>C</b>	<b>Declaration</b>
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I agree to observe and abide by the SAHPA Constitution and current Rules and Regulations, site rules, and all air space restraints.

**I do not suffer from:**

Diabetes Mellitus, Epilepsy, Narcolepsy, sudden attacks of fainting or giddiness, any mental disorder referred to in sections 2(1) & (3) of the Mental Disorders Act, 1916, addiction to any drug having a narcotic effect, or any disease, defect or disability (including excessive eyesight deficiency) likely to render me incapable of controlling a hang-glider or paraglider without endangering public safety.

Should I suffer from any illness or condition that could invalidate this medical declaration, a medical certificate from a medical practitioner stating my fitness for participating in my sports will be presented.

→ Pilot's Signature..... Date..... ←

<b>D</b>	<b>Licence</b>	<b>NB: This Section to be completed by Club Licensing &amp; Safety Officers or Instructors</b>
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Attach copy of valid licence from country of origin and any other documentation available, including copy of logbook if possible. It may be necessary for Sports Licence equivalent applications to have written and passed the Sports Licence test (attach test paper). See notes on reverse.

This pilot has fulfilled all the necessary requirements in accordance with existing rules to qualify for the following equivalent licence to be issued

Pilot's current Licence Grade..... Number..... Expiry Date .....

Country of origin .....

Equivalent Grade to be issued..... Sports Licence test written and passed:.....

Issuing L&S Officer or Instructor's Name.....

Licence Number ..... Signature.....

### For Office Use Only

Membership Validity: (Two Months) Date of issue:..... Expiry Date.....

Payment received on (Date).....

...↓.....↓.....↓.....Remove this Portion and hand to Pilot...↓.....↓.....↓.....

## Receipt of Payment (R200)

This Receipt to be retained by Visiting Pilot as proof of valid SAHPA Licence and 3<sup>rd</sup> Party Insurance

Pilot Name:.....

Date Paid..... Licence grade ..... Temporary Membership Number .....

Received By: Name ..... Signed ..... SAHPA Licence # .....



Pilot name:.....

**Mobile Phone Number in SA :**

**Addresses while travelling in Southern Africa**

Planned itinerary of travel: .....

Places of Accommodation (including address & telephone):

(1).....

(2).....

(3).....

**Contact Person(s) in South Africa**

Name:..... Tel:.....

Name:..... Tel:.....

**Contacts in Home Country**

Name: ..... Relationship.....

Tel:.....

Name:..... Relationship.....

Tel:.....

**Sports Cover Insurance (if applicable)**

Company.....

Broker.....

Telephone Number..... Fax #.....

Policy / Contract Number.....

**Glider Details**

Manufacturer..... Model..... Size.....

Colour(s).....

Markings.....

**NOTES:**

1. The fees must be deposited with SAHPA within 7 days. **SAHPA**
2. **A copy of a valid licence from the country of origin must be attached.** Other supporting documents will be welcome. If application is handed to one of the local instructors or a club committee member, show your foreign licence for verification.
3. The foreign licence **MUST** be valid for full period of stay in South Africa.
4. Very experienced pilots from countries that do not have a two or more tier licensing system, will be required to write the Sports Licence theory test to obtain the South African Sports Licence equivalent rating. Test must be submitted to SAHPA Office.
5. A SAHPA Instructor or Safety & Licensing Officer must complete section D.
6. In Section B, please use postal address in home country
7. Complete reverse of form, and give contact details while in South Africa.
8. This Temporary membership includes the Radio Users Licence as issued by the Dept. of Telecommunications **Call-sign: ZRF 874 2**

**SAHPA Radio Frequencies:**

**141.600 MHz and 141.625 MHz**