



# PARAGLIDING ASSOCIATION OF INDIA

(Registration no.: 500/Goa/2010)

Nizari Bhavan, 5<sup>th</sup> Floor, Menezes Braganza Road, Panaji, Goa 403 001.

Tel: +91-832-2431192 / 93

base@pgaoi.org

www.pgaoi.org

## APPLICATION FOR VETERAN SCHOOL/CLUB MEMBERSHIP

To,  
The Secretary,  
PAI Secretariat  
Flat: 3084, Clover Heights, B-3,  
Wanawadi, Pune 411040

Affix 1  
**PASSPORT  
SIZE  
PHOTO** of the  
School/Club Owner  
3.5 x 4.5 cms

2 more copies of the  
same photo to be  
submitted along with  
this form

**PLEASE USE BLOCK LETTERS ONLY**

The application should be filled by the current owner of the school/club

### Applicant's Details:

\_\_\_\_\_  
(First Name) (Middle Name) (Surname)

Gender M  / F  Date of birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Email ID \_\_\_\_\_ Valid email ID for all communications

### SCHOOL / CLUB DETAILS

Name of the school / club \_\_\_\_\_

Location \_\_\_\_\_ State \_\_\_\_\_

Year of establishment \_\_\_\_\_ Proof attached

### Communication Address

\_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ Dist. \_\_\_\_\_

State \_\_\_\_\_ Pin Code \_\_\_\_\_

Web site WWW. \_\_\_\_\_ Contact No. \_\_\_\_\_

*I, the undersigned, do hereby apply for Membership of the Paragliding Association of India (PAI), and agree to abide by, and observe, the Rules, Regulations and bye-laws of PAI at all times.*

Date \_\_\_\_\_

Place \_\_\_\_\_

Applicant's Signature



**SCHOOL / CLUB DETAILS (To be verified by PAI representatives)**

**CHIEF INSTRUCTOR**

Name \_\_\_\_\_

Chief Instructor Experience Summary \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Hours Flown - PG \_\_\_\_\_ hrs. PPG \_\_\_\_\_ hrs. Proof/s attached

Certification or Licenses Held \_\_\_\_\_ First Aid / Safety Certification

\_\_\_\_\_

Certification Proof/s attached

\_\_\_\_\_

Certification Proof/s attached

Number of students trained so far (approx.) \_\_\_\_\_

**COURSES/ CERTIFICATION (Details of Certification / License issued by the school)**

Beginner Course \_\_\_\_\_

Intermediate Course \_\_\_\_\_

Advanced Course \_\_\_\_\_

Other courses offered \_\_\_\_\_

**EQUIPMENT LIST**

<i>Type</i>	<i>Brand</i>	<i>Model</i>	<i>Certification No.</i>	<i>Year of prod.</i>

**OTHER AFFILIATIONS - Any other PG/PPG organisation (National / International)**

<i>Organization Name</i>	<i>Affiliation Type / Membership No</i>

**CREW**

**Assistant Instructors**

[1] Name \_\_\_\_\_ Gender M / F Age \_\_\_\_\_ yrs.

Experience Summary \_\_\_\_\_

\_\_\_\_\_

Certification \_\_\_\_\_ Safety/First Aid \_\_\_\_\_

Certification Proof/s attached

Certification Proof/s attached

[1] Name \_\_\_\_\_ Gender M / F Age \_\_\_\_\_ yrs.

Experience Summary \_\_\_\_\_

\_\_\_\_\_

Certification \_\_\_\_\_ Safety/First Aid \_\_\_\_\_

Certification Proof/s attached

Certification Proof/s attached

[1] Name \_\_\_\_\_ Gender M / F Age \_\_\_\_\_ yrs.

Experience Summary \_\_\_\_\_

\_\_\_\_\_

Certification \_\_\_\_\_ Safety/First Aid \_\_\_\_\_

Certification Proof/s attached

Certification Proof/s attached

**TANDEM OPERATIONS**

**Equipment**

<i>Brand</i>	<i>Model</i>	<i>Certification No.</i>	<i>Year of prod.</i>

**Tandem Pilots**

<i>Name</i>	<i>Experience/Details</i>

## EQUIPMENT SALES

<i>Type</i>	<i>Brand</i>

## FIRST AID AND SAFETY

<i>Type</i>	<i>Details (Quantity, specification if any)</i>
<b>First Aid Box</b>	
<b>Stretchers</b>	
<b>Vehicle</b>	

## OTHER INFORMATION (optional)

## DECLARATION 'A'

(By the Applicant)

I declare that all information provided by me is correct. I am responsible for accuracy of the data mentioned in the submitted documents. In case of any modification in the submitted information I am responsible to inform the same to the PAI.

The equipment mentioned in the documents is owned by the school / club / applicant. I shall always use approved equipment and follow all established and approved safety practices in the school/club at all times, and shall always hold the PAI fully indemnified against any claims of whatsoever nature from any of our students/club members or for any other third parties.

Signed \_\_\_\_\_ by \_\_\_\_\_

Designation \_\_\_\_\_

Place \_\_\_\_\_ Date \_\_\_\_\_

APPLICANT'S SEAL >

# DECLARATION 'I'

(By the PAI Inspection Team)

The applicant School / Club was inspected by us. Following documents/ proofs are collected.

<input type="checkbox"/>		
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Detailed findings relating to the school/club and its operations will be submitted to The President, PAI.

Signed _____  By _____  Place _____  Date _____	Signed _____  By _____  Place _____  Date _____
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PAI SEAL >