



AUSTRALIAN PARACHUTE FEDERATION

C2

PO Box 1440, Springwood QLD 4127
 P-(07) 3457 0100 ~ F-(07) 3457 0150 ~ E-apf@apf.com.au ~ W-www.apf.com.au

C2 - CERTIFICATE CLASS F APPLICATION

Name Date of Birth/...../.....
 Address APF No
 Postal Address.....
 Email Mobile

I have made 1,000 freefall jumps including 20 landing within ½ metre of target centre. The 20 jump numbers from my logbook are: ____/____
 I have made at least one jump at night, shown in my log as jump number:
 I hold a current Display Pro number _____ or I have made 20 consecutively nominated jumps landing within 5m of the target centre.
 The 20 jumps are as below: Log of accuracy performance required for a Certificate Class F application

	Jump No	Date and time jump nominated	DZSO signature (prior to emplaning)	Distance from target	DZSO signature (after landing)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Distance is measured from the first point of contact to the Target Centre. *(In the interest of safety, tandem jumps **cannot** be nominated)*. Records which appear to have been altered, erased or have been filled out all at one time will not be accepted.

Statement by Applicant: I hereby declare that I have met all APF requirements applicable to this application, and agree to abide by the APF Code of Ethics, regulations, policies and procedures.
 Applicant Signature: Date/...../..... Club Affiliation:

Verification by Chief Instructor: I, the undersigned, being an APF Chief Instructor, have checked the above information and certify that the applicant has met all APF requirements applicable to this application
 Chief Instructor (Pls Print) Training Organisation:
 Signature: Date...../...../.....

Verification by Safety & Training Officer: I, the undersigned, being an APF STO, have checked the above information and certify that the applicant has met all APF requirements applicable to this application

STO (Pls Print) Area:

Signature: Date...../...../.....

\$25 (non-refundable) Fee per application as applicable, Please complete the following fields.

Payment Details - Post, email or fax this form to the APF Office with your payment

MasterCard

Visa

Cheque

Money Order

Life Member

Expiry date:

Name on Card: Amount approved:

Have you considered making a donation to the Australian Parachute Team? Tax deductible donations to support our national teams with training and competition costs may be made to the Australian Sports Foundation. For further information visit www.apf.com.au