

**Artisan Aviation Inc.**

**Member Insurance Renewal Information**

**Prospective Pilot:**

Name on Pilot's Certificate: \_\_\_\_\_

Pilot's Certificate Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Date of Last Medical Certificate: \_\_\_\_\_ Class: \_\_\_\_\_ or Basic Med [ ]

Date of Last Flight Review or Equivalent: \_\_\_\_\_

1.) Have you ever had an aircraft accident, incident, unreported claim or been the pilot of an aircraft that was damaged while you were the pilot in command?

Yes \_\_\_\_\_ (Please contact a club officer) No \_\_\_\_\_

2.) Has your driver's license ever been suspended, surrendered or revoked or have you ever been arrested for or charged with operating an aircraft or motor vehicle while under the influence of drugs or alcohol?

Yes \_\_\_\_\_ (Please contact a club officer) No \_\_\_\_\_

**Pilot Experience:**

Note - the time entered for the specific make and model aircraft listed below must be in only the specific aircraft. Time in a make and model that does not exactly match the makes and models listed below should not be entered.

Note - total hours includes all makes and models.

	<b>Total</b>	<b>Last 12 Mo</b>		
Hours - PA32R-300			Total Hours in Retractable	
Hours - PA28RT-201			Total Hours in Multi-Engine	
Hours - PA28-161			Total Hours in Tail Wheel	
Hours - All Aircraft			Total Hours in Last 90 Days	

**Agreement:**

I agree to provide Artisan Aviation Inc. copies of requested personal documentation related to any insurance claim, legal, or regulatory action involving my use of any club asset.

Signed \_\_\_\_\_ Date \_\_\_\_\_