

5161 East Memorial Drive Muncie, IN 47302 Phone: 765-287-1256 Email your application to: NationalRecords@modelaircraft.org

Application for National Record – RC Soaring

This form must be filled out and mailed within fourteen (14) days of the record attempt flight.

Claimant Information (PLEAS	SE PRINT)					
Name:			AMA Number:			
Mailing Address:		Email Address:				
City:		State:		Zip:		
Daytime Phone: ()		Evening Phone:	()			
Date of Birth:	Signature:					
If record was set at a meet, of Meet held in the USA	complete this section. (If not, s	skip to "Event Class and C	Category.")			
Name of Meet:		Cont	est Classification:			
City:	State: Zip: Date of Flight:					
Meet held outside the USA	reade appearly on departite arrest.					
	Contest Classification:					
	Count					
Date of Flight: NOTE: Must also include any add	 itional information applicable to CIA	AM record homologation (ceiling, height, win	d velocity, etc.).		
Event Class, Sub-Class and	Category (PLEASE CIRCLE ON	E IN EACH COLUMN)				
EVENT CLASS Sailplane Electric-Powered Sailplane	SUB-CLASS Class A: Hand-Launch Class B: Two (2) Meter Class C: Standard Class D: Unlimited	CATEGORY Slope Duration Declared Distar Closed Course Altitude	nce	Thermal Duration Open Distance Goal & Return Speed		
Name of model:		Des	igner:			
	t manufacturer:					
(If original design is used, a three	ee-view drawing is required.)					
Wingspan:	Wing area:	Stab area:		Total weight:		
Functions used: Elevator	Rudder	Spoiler	Aileron	Other		
RC equipment: Manufacturer		TX	RX	No. of servos		
Method of launch:	Length of line:					
DURATION: Slope Thermal Record Data	Lowest reading:	Hrs Mi	in	_ Sec.		
First official watch reading:	Hrs Min Sec	c. Timer's signature:	····			
Second official watch reading:	Hrs Min	Sec. Timer's signature:			· · · · · · · · · · · · · · · · · · ·	
	☐ Closed Course ☐ Goal & Retu					
	AMA APPLICATION FOR	NATIONAL RECORI	D – RC SOARIN	NG		

Distance flown:(Enclose appropriate map and declare	Metersation if attempt is for de		neters Miles e.)		Laps			
SPEED: First official watch reading:	Sec.	Timer's signature:						
Second official watch reading	g: Sec.	Timer's signature:						
Third official watch reading:	Sec.	Timer's signature:						
Fourth official watch reading:								
Speed calculation (1968 /		avg. sec.)	/ 1.4667 =					_ MPH
ALTITUDE:								
Method used: □Barograph i	n model □Barograph	in full-scale aircraft	□Theodolite triar	ngulation				
If barograph was used: Init	ial setting:			Date	∍	I	I	
	nal setting:				e	I	_	
Signature of barograph calibrator:								
Signature of pilot (full-scale, if applical								
Signature of: Observer Witness (NOTE: The pilot's signature attests to also.)								tatement
If theodolite was used: Op	erator Number 1 - sign	ature:						
Op	oerator Number 2 - sign	ature:						
	<u>E) + b (Tan D)</u> H =	2						
	• •	∠ lltitude equation)						
	Base line c		ft.					
/ #{		t. Leg a						
b a 2								
DAS . BS	H (altitude)							
Meets held in the USA (PLEASE	PRINT)							
Contest Director's Statement: This is to certify that I have checked the	ne above statement for	(flier's name)			_ and tha	at it agrees	with the	official
flight data for the competition named a								
and had contestar	nts. This also certifies th	at all specifications	of the rules were m	net by the mode	l, the sup	port equip	ment, an	d the flier
at the time of the claimed record perfo	ormance.							
Contest Director (please print):			AMA No.:		Date:	ı	1	
Contest Director's Signature:								
All record applications must be accommodate accommodate accommodate accommodate accommodate and applications. All applications accommodate	npanied by sufficient do	cumentation describ						
Meets held outside the USA								
World Championship Director:								
Name (please print):					Date:			
Signature:								
NOTE: A document must be attached to				ione under which	a it was fle	own most al	l the crite	ria for the
event in which it was flown. The docume Board, will be posted in the appropriate of	ent must be endorsed by	the Director of the Wo	orld Championship.	The record, if ho	mologated	d by the app		
FOR CONTEST BOARD USE ON	NLY							

Record approved by:			·	AMA No.:		
Signature:				_ Date:		I
Deny:	Reason denied:					
	PAYMENT for ADULT RECORDS ONL	Y (pay	ment mu	ıst be ind	cluded	with
application) \$25.00 Processing f	ee					
Circle Payment type						
Check Visa Mas	tercard Discover					
Card No	Exp:/					
CVV Code (las	st 3 digits on white strip on back of credit	t/dehit	card)			
	-		·			
Name as it appears o	n card (print)					
Billing address of cree	dit card:					
Address:						
City:	State:	<u>:</u>	_ Zip:			
SIGNATURE:						
If paying by check inle	ease mail completed form and check to:					
	·					
Academy of Model Attn: National Reco						
5161 E. Memorial Dr						
Muncie, IN 47302						
If paying by credit car	d, you can email the application to:					
nationalrecords@m	• •					