



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 (PLEASE 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, complete this section. (If not, skip to "Event Class and Category.")

#### Meet held in the USA

Name of Meet: \_\_\_\_\_ Contest Classification: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Date of Flight: \_\_\_\_ | \_\_\_\_ | \_\_\_\_
(If more information for location, please specify on separate sheet.)

#### Meet held outside the USA

Name of Meet: \_\_\_\_\_ Contest Classification: \_\_\_\_\_
Province: \_\_\_\_\_ Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_
Date of Flight: \_\_\_\_ | \_\_\_\_ | \_\_\_\_

NOTE: Must also include any additional information applicable to CIAM record homologation (ceiling, height, wind velocity, etc.).

#### Event Class, Sub-Class and Category (PLEASE CIRCLE ONE IN EACH COLUMN)

Table with 4 columns: EVENT CLASS, SUB-CLASS, CATEGORY, and Thermal Duration. Includes options like Sailplane, Class A: Hand-Launch, Slope Duration, etc.

Name of model: \_\_\_\_\_ Designer: \_\_\_\_\_

Original design: [ ] Yes [ ] No Kit manufacturer: \_\_\_\_\_ Magazine plans: \_\_\_\_\_

(If original design is used, a three-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 Lowest reading: \_\_\_\_\_ Hrs. \_\_\_\_\_ Min. \_\_\_\_\_ Sec.

#### Record Data

First official watch reading: \_\_\_\_\_ Hrs. \_\_\_\_\_ Min. \_\_\_\_\_ Sec. Timer's signature: \_\_\_\_\_

Second official watch reading: \_\_\_\_\_ Hrs. \_\_\_\_\_ Min. \_\_\_\_\_ Sec. Timer's signature: \_\_\_\_\_

DISTANCE: [ ] Open [ ] Declared [ ] Closed Course [ ] Goal & Return

Distance flown: \_\_\_\_\_ Meters \_\_\_\_\_ Kilometers \_\_\_\_\_ Miles \_\_\_\_\_ Laps

(Enclose appropriate map and declaration if attempt is for declared distance.)

SPEED: First official watch reading: \_\_\_\_\_ Sec. Timer's signature: \_\_\_\_\_

Second official watch reading: \_\_\_\_\_ Sec. Timer's signature: \_\_\_\_\_

Third official watch reading: \_\_\_\_\_ Sec. Timer's signature: \_\_\_\_\_

Fourth official watch reading: \_\_\_\_\_ Sec. Timer's signature: \_\_\_\_\_

(Duration)

Speed calculation (1968 + \_\_\_\_\_ avg. sec.) + 1.4887 = \_\_\_\_\_ MPH

ALTITUDE:

Method used:  Barograph in model  Barograph in full-scale aircraft  Theodolite triangulation

If barograph was used: Initial setting: \_\_\_\_\_ Date \_\_\_\_ | \_\_\_\_ | \_\_\_\_

Final setting: \_\_\_\_\_ Date \_\_\_\_ | \_\_\_\_ | \_\_\_\_

Signature of barograph calibrator: \_\_\_\_\_

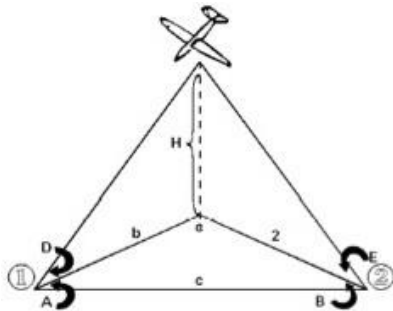
Signature of pilot (full-scale, if applicable): \_\_\_\_\_

Signature of:  Observer  Witness \_\_\_\_\_

(NOTE: The pilot's signature attests to the fact that he/she followed the model, but never rose above it. The observer must attest to the above statement also.)

If theodolite was used: Operator Number 1 - signature: \_\_\_\_\_

Operator Number 2 - signature: \_\_\_\_\_



$$H = \frac{E + b (\tan D)}{2}$$
  
(altitude equation)

Base line c \_\_\_\_\_ ft.

\_\_\_\_\_ ft. Leg a \_\_\_\_\_ ft.

Angle A \_\_\_\_\_ Angle B \_\_\_\_\_

Angle D \_\_\_\_\_ Angle E \_\_\_\_\_

H (altitude)

**Meets held in the USA (PLEASE PRINT)**

**Contest Director's Statement:**

This is to certify that I have checked the above statement for (flier's name) \_\_\_\_\_ and that it agrees with the official flight data for the competition named above, sanctioned by AMA, Certificate of Sanction No. \_\_\_\_\_ which was directed by me and had \_\_\_\_\_ contestants. This also certifies that all specifications of the rules were met by the model, the support equipment, and the flier at the time of the claimed record performance.

Contest Director (please print): \_\_\_\_\_ AMA No.: \_\_\_\_\_ Date: \_\_\_\_ | \_\_\_\_ | \_\_\_\_

Contest Director's Signature: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

All record applications must be accompanied by sufficient documentation describing methods and equipment used, proof of accuracy of equipment, and competence of operators. All applicable data must be included on application.

**Meets held outside the USA**

**World Championship Director:**

Name (please print): \_\_\_\_\_ Date: \_\_\_\_ | \_\_\_\_ | \_\_\_\_

Signature: \_\_\_\_\_

NOTE: A document must be attached to the record application which attests that the model and the conditions under which it was flown meet all the criteria for the event in which it was flown. The document must be endorsed by the Director of the World Championship. The record, if homologated by the appropriate Contest Board, will be posted in the appropriate category with records set in the United States, and will not be differentiated from them in any way.

**FOR CONTEST BOARD USE ONLY**

Record approved by: \_\_\_\_\_ AMA No.: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_ | \_\_\_\_ | \_\_\_\_

Deny: \_\_\_\_\_ Reason denied: \_\_\_\_\_

**APPLICATION FEE PAYMENT (payment must be included with application)**

**\$25.00 Processing fee**

**Circle Payment type:**

Check    Visa    Mastercard    Discover

Card No \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp: -----/-----

CVV Code \_\_\_\_\_ (last 3 digits on white strip on back of credit/debit card)

Name as it appears on card (print) \_\_\_\_\_

Billing address of credit card:

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

If paying by check, please mail completed form and check to:

**Academy of Model Aeronautics**

**Attn: National Records**

**5161 E. Memorial Dr.**

**Muncie, IN 47302**

If paying by credit card, you can email the application to:

**[nationalrecords@modelaircraft.org](mailto:nationalrecords@modelaircraft.org)**

Revised 01.01.2020