



5161 East Memorial Drive Muncie, IN 47302 Phone: 765-287-1256

Email your application to: NationalRecords@modelaircraft.org

Application for National Record – Outdoor Free Flight

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: (____) _____ - _____
Signature: _____

Meet Information (Meet held in the USA.)

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

Meet Information (Meet held outside the USA, at a World Championship.)

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 and Age Classification PLEASE CIRCLE EVENT AND AGE GROUP. "Youth-Junior" (age 0-14 by July 1), "Youth-Senior" (ages 15-18 by July 1), or "Adult" (age 19 or older by July 1).

*See current FAI Sporting Code. Circle Category NONE, I, II, or III.

OUTDOOR FREE FLIGHT

Table with 3 columns: Model Number, Model Name, and Category (YJ, YS, A). Lists models 101* through 166 including Gas, Classic Gas, Payload, Cargo, Mulvihill, P-30, Ornithopter, Autogiro, Helicopter, Moffett, and HL Glider.

Circle Category for Event indicated:

NONE I II III

Total Duration: Minutes: _____ Seconds: _____

This performance is believed to have bettered the existing record of the model aircraft as described below. In reporting this performance, all the pertinent official AMA regulations have been complied with. All applicable data MUST be provided. The report form MUST be accompanied by a three-view sketch of the model, when it is an original design, with all pertinent dimensions and material notes attesting that the model meets the rules. Also, any novel mechanical or aerodynamic features should be noted. This data is to be used for checking purposes by the Contest Board. It will be filed in the records of the Academy of Model Aeronautics and may appear in AMA publications. Submission of the data will in no way interfere with the rights of the designer. Failure to comply with any of these requirements will be considered sufficient cause for rejection of the report by the Contest Board.

Original design: Yes No (If YES, attach a three-view sketch.) Kit name: _____

Plane name: _____ Publication name and date: _____

Total weight: _____ Wing area: _____ Stabilizer area: _____ Engine displacement: _____ Stroke: _____ Bore: _____
 How checked: _____ By whom: _____
 Fuel checked for tetranitromethane content? _____ Rubber weight: _____ (P-30 only) Propeller diameter: _____
 Prop manufacturer: _____ (Electric power only) Number of battery cells used: _____
 (CO2 power only) Ratio of tank volume to piston displacement: _____ (Autogiro only) Area of rotating vanes: _____
 (Ornithopter only) Projected area of flapping wings: _____ Total wing area: _____
 Weather conditions: _____ Wind: _____ mph

FLIGHT DURATION:

| | | |
|---------------------------|---------------------------|---------------------------|
| Engine Run/Seconds: _____ | Engine Run/Seconds: _____ | Engine Run/Seconds: _____ |
| 1st Flight: _____ | 2nd Flight: _____ | 3rd Flight: _____ |
| ----- | | |
| Engine Run/Seconds: _____ | Engine Run/Seconds: _____ | Engine Run/Seconds: _____ |
| 4th Flight: _____ | 5th Flight: _____ | 6th Flight: _____ |
| ----- | | |
| Engine Run/Seconds: _____ | Engine Run/Seconds: _____ | Engine Run/Seconds: _____ |
| 7th Flight: _____ | 8th Flight: _____ | 9th Flight: _____ |
| ----- | | |
| Engine Run/Seconds: _____ | Engine Run/Seconds: _____ | Engine Run/Seconds: _____ |
| 10th Flight: _____ | 11th Flight: _____ | 12th Flight: _____ |

(If more flights exist, list on separate sheet.)

For more information and publication use only, list any innovative features used: _____

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.

Meet 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

Revised 10.30.17