

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.

Claima	ant Information (PLI	EASE PRIN	IT)								
Name:								AMA Number:			
				Email Address:							
City:	St	ate:	Zip:		Daytime I	Phone: (_)	Evening P	none: ()		
Signatu	ıre:										
Meet I	nformation (Meet he	ld in the LIS	:Δ)								
, ,						Sanct	ion #	Contact Classification:			
Name of Meet:											
(If more	e information for locatio	n, please sp	pecify on sep	_ Stat parate	e: sheet.)	Zip: _		Date of Flight: _			
Meet I	nformation (Meet he	ld outside th	ne USA, at a	World	d Champio	nship.)					
Name of Meet:				Contest Cla				Contest Classification:			
Province:								Postal Code:			
	Flight:										
NOTE:	Must also include any	additional ir	nformation ap	oplical	ole to CIAN	Л record I	homologa	ation (ceiling, height, wind velo	city, etc.)		
See cı	or "Adult" (age 19 or o current FAI Sporting Coc DOR FREE FLIGHT 1/2A Gas A Gas B Gas C Gas D Gas Payload Cargo 1/2A Classic Gas A/B Classic Gas C/D Classic Gas Mulvihill P-30 Ornithopter Autogiro		ategory NON YJ	YS YS YS YS YS YS YS YS YS YS YS YS	A A A A A A A A A A A A		142 150 151* 152* 153* 154* 155* 156* 158* 159* 160 161 162 163	Catapult Glider F1A—A2 Glider F1B Wakefield F1C Power F1G Coupe d'Hiver F1H—A1 Glider F1J 1/2A Class Power 1 F1K—CO2 F1P Power F1Q Electric Power Electric A Electric B Rocket CO2	YJ YS A YJ YS A YJ YS A YJ YS A YJ YS A YJ YS A		
127	Helicopter		YJ	YS	Α		164	Large CO2	YJ YS A		
128 140	Moffett HL Glider			YS YS			165 166	E36 Electric F1S	YJ YS A YJ YS A		
Circle Category for Event indicated:											
					NONE	ı	11 11	I			
	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: 2Yes 2No (If YES, attach a t	hree-view sketch.) Kit nam	e:									
Plane name:	Publication name and o	date:									
Total weight: Wing area:	Stabilizer area:	Engine displacemen	nt: Stroke:	Bore:							
How checked:		By whom:									
Fuel checked for tetranitromethane content?	Rubber weight:	(P-30 only) Pro	ppeller diameter:								
Prop manufacturer:	(Electric po	wer only) Number of ba	ttery cells used:								
(CO2 power only) Ratio of tank volume to piston displacement: (Autogiro only) Area of rotating vanes:											
(Ornithopter only) Projected area of flapping wing	gs:	Tota	ll wing area:								
Weather conditions:			Wind: _	mph							
	FLIGHT DUR	ATION:									
Engine Run/Seconds:	_ Engine Run/Seconds:		Engine Run/Seconds:_								
1st Flight:	2nd Flight:		3rd Flight:								
Engine Run/Seconds:	_		•								
4th Flight:											
Engine Run/Seconds:	Engine Run/Seconds:		Engine Run/Seconds:_								
7th Flight:											
Engine Run/Seconds:	_ Engine Run/Seconds:		Engine Run/Seconds:_								
10th Flight:											
(If more flights exist, list on separate sheet.)											
For more information and publication use only, li Meets held in the USA (PLEASE PRINT) Contest Director's Statement:											
This is to certify that I have checked the above s											
flight data for the competition named above, san and had contestants. This als											
at the time of the claimed record performance.	o certifics that all specifications	of the fales were met t	by the model, the suppl	or equipment, and the mer							
•											
Contest Director (please print):		AMA No.:									
Contest Director's signature:		Pr	none: ()								
All record applications must be accompanied by competence of operators. All applicable data mu		bing methods and equip	oment used, proof of ac	ccuracy of equipment, and							
Meet held outside the USA World Championship Director:											
Name (please print):			Date:								
Signature:											
NOTE: A document must be attached to the reco criteria for the event in which it was flown. The d the appropriate Contest Board, will be posted in any way.	ocument must be endorsed by t	he Director of the World	d Championship. The re	ecord, if homologated by							

FOR CONTEST BOARD USE ONLY Record approved by:_______AMA No.:_____ _____ Date: ___ | ___ | ___ | Signature: Deny: _____ Reason denied:____ APPLICATION FEE PAYMENT FOR ADULT RECORDS ONLY (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: _____ 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