



BRETT AVIATION
PILOT REGISTRATION

NAME: _____

HOME #: _____ CELL #: _____ OFFICE #: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

BIRTHDATE: _____ HEIGHT: _____ WEIGHT: _____ HAIR: _____ EYES: _____

LICENSE NOW HELD: _____ NUMBER: _____ DATE: _____

EMAIL ADDRESS

STANDARD OPERATING PROCEDURES

All Student Pilots, Licensed Renter Pilots, Brett Aviation Instructors, and Brett Aviation Staff, shall abide by all the rules set forth in the following Standard Operating Procedures. Failure to comply with these procedures may result in the immediate suspension of flight privileges pending a review by Brett Aviation Administration. A copy of the Standard Operating Procedures can be viewed on our website at www.brettaviation.com or a hard copy will be provided.

I have received, reviewed and understand the Brett Aviation Standard Operating Procedures.

Signature

Printed Name

Date