

BRITISH MODEL FLYING ASSOCIATION – BRITISH NATIONAL RECORD CLAIM FORM

SPACE MODELS ONLY

Please print clearly

RECORD CLASS NUMBER:

NAME OF CLAIMANT:

RECORD CLASS:

ADDRESS:

SPECIFICATION OF MODEL AIRCRAFT	
TOTAL SURFACE AREA <small>(Boost Glider, RC Rocket Glider & Flexwing only)</small>	
WING AREA	
WEIGHT WITHOUT FUEL	
WEIGHT WITH FUEL	
OVERALL LENGTH	
AIRFRAME CROSS SECTION	
RECOVERY DEVICE	DIMENSIONS
	MATERIAL
	DESIGN (Parachute only)
	N° OF LINES (Parachute only)
POWER	TYPE OF ENGINE
	MAKE OF ENGINE
	TOTAL IMPULSE (Ns)
	NUMBER OF ENGINES (Altitude)
	TOTAL IMPULSE OF ALL ENGINES <small>(Altitude)</small>
OWN/PROPRIETARY DESIGN <small>(name of):</small>	
Plan, side & front view drawings with principal dimensions must be given on the reverse of this form or an appropriately identified separate sheet.	

MEMBERSHIP N°:

SIGNATURE:

NAME OF CLUB:

FAI LICENCE N° (For World Records)

CATEGORY: ALTITUDE PARACHUTE STREAMER GYROCOPTER BOOST GLIDER (circle & delete as appropriate)
 RC ROCKET GLIDER FLEXWING

DURATION: mins secs ALTITUDE: m

DATE OF FLIGHT: VENUE:

WIND SPEED: mph TEMPERATURE: °C HUMIDITY: % PRESSURE: MB
..... complete as appropriate

OTHER WEATHER : SUN OVERCAST RAIN VARIABLE (circle & delete as appropriate)

We, the undersigned, certify that we witnessed and, with appropriate certified equipment, timed the flight claimed above and that the details of the model aircraft are as stated.

NAME (print): SIGNATURE:

CLUB: BMFA N°: DATE:

NAME (print): SIGNATURE:

CLUB: BMFA N°: DATE:

THIS FORM MUST BE FULLY COMPLETED AND SENT TO THE BMFA RECORDS OFFICER, CHACKSFIELD HOUSE, 31 ST ANDREWS ROAD, LEICESTER, LE2 8RE

FOR OFFICIAL USE ONLY	CLAIM RECEIVED ON:	RATIFIED BY FULL/TECHNICAL COUNCIL ON:
	CERTIFICATE ISSUED ON:	ISSUED BY:

BRITISH NATIONAL RECORD CLAIM FORM - plan, side & front views of the model aircraft with principal dimensions