

INFOSHEET

DATE: _____

RENEWAL MEMBERSHIP

*FULL MEMBER

*MEMBER

*GUEST



Personal Information:

Name: _____ Familyname: _____

Date of birth: _____

Fill in only if you have your own equipment:

Container: _____ Reserve Canopy: _____

Main Canopy: _____ AAD: _____

Date last repack: _____

Skydive experience:

Total amount of jumps:

Total jumps within last 12 months

Membership type:

New member

1st year membership

Renewed member

2nd year membership

Working member*

3th year membership (only if you choose for it)

* I was a member the last 2 previous years, and I prefer to become a working member, so I may participate in the General meeting and have a right to vote: **YES / NO**

Guest skydivers and members with a foreign insurance only:

Insurance company: _____ Insurance valid until: _____

Statement

I hereby declare to comply with the basic safety regulations (BVR) of the VVP, the internal regulations and the manifest regulations of Paracentrum Vlaanderen. I am fully aware that if I violate these regulations, this may lead to being excluded from the skydive activities temporarily or permanently.

I declare to have a valid insurance for medical coverage and for third party liability, equivalent to the insurance of the VVP.

Signature: