



CLOSER TO RALLY.

## HELICOPTER REGISTRATION FORM

### HELICOPTER

|                            |  |
|----------------------------|--|
| Helicopter's registration: |  |
| Make and model:            |  |
| Colours:                   |  |

### OWNER

|                          |  |
|--------------------------|--|
| Company / Name:          |  |
| Address:                 |  |
| Phone:                   |  |
| Flight Manager Name:     |  |
| Phone:                   |  |
| Invoice/billing address: |  |

### OPERATION

|  |  |
|--|--|
| What will be the use of the helicopter during the rally? | CAT <input type="checkbox"/> SPO <input type="checkbox"/> Description: _____<br>_____                                  |
| Flying under contract from:                              |  |
| Overnight parking location:                              | Umeå airport <input type="checkbox"/> Other <input type="checkbox"/><br>Description: _____                             |
| Refueling:   | Umeå airport <input type="checkbox"/> Other <input type="checkbox"/>   |
| Wich dates will you be flying during the rally?          | FRIDAY 16 FEB <input type="checkbox"/> SATURDAY 17 FEB <input type="checkbox"/> SUNDAY 18 FEB <input type="checkbox"/> |

### PILOT

|  |  |
|--|--|
| Name:  |  |
| Phone:   |  |
| E-mail address<br>(all info will be by e-mail) |  |
| Address and mobile<br>phone during the event:  |  |

I, the pilot/commander of the above helicopter, agree to follow the rules notified to me during the Rally. I am personally responsible for attaining this accreditation by attending the Safety Briefing.

SIGNATURE: .....

Send to the event Helicopter Coordinator Tomas Rönnkvist  
e-mail: [tomas@trcab.se](mailto:tomas@trcab.se), Mobile: +46 70 663 85 37  
Closing date for registration of helicopters is **Sunday 28<sup>th</sup> of January**.