



# AUSTRALIAN PARACHUTE FEDERATION

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ACN: 101 980 358

## APPLICATION FOR FAI SPORTING LICENCE

To enter an FAI sanctioned international competition or record attempt

<b>1. Personal Details:</b>	
Name (capital letters)	
Home address	
Contact details	Phone (H): _____ (Mob): _____
	Email: _____
Date of Birth	
Citizenship	(If not Australian, state residential status)
APF Number (if applicable)	
<b>2. Event details:</b>	
Event Name	
Event Date	
Do you require competition sanctioning by the Australian National Airsport Control (NAC)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>3. Conditions of Issue:</b>	
	Licenses are valid for this event only The cost of a licence is:  a) No charge for approved international Parachuting events  b) No charge for approved APF Judges  c) \$660 (GST incl.) for adult international non-Parachuting events  d) \$440 (GST incl.) for U16 international non-Parachuting events

#### 4. Declaration:

- a)** In making this application, I agree to abide by FAI's Sporting Regulations, and the conditions set down by Air Sport Australia Confederation. I understand that the licence is issued on behalf of the FAI and may be withdrawn at any time.
- b)** I do not hold an FAI Licence issued by the NAC of another country and have not competed under the NAC of another country during the last 2 years.
- c)** I have resided in Australia for more than 183 days over the last 365 days.
- d)** I agree to the upload and storage of mandatory personal information on the FAI database.
- e)** I understand that I must not enter any competitions or attempt any aviation records unless the FAI Sport Licence is valid and stored on the FAI database.
- f)** I understand that a Therapeutic Use Exemption must be obtained for any medication that I am currently using, and which contains substances listed on the WADA Prohibited List, before entering any competitions or attempting any aviation records.
- g)** I acknowledge that neither the APF, Air Sport Australia Confederation Inc. (ASAC) or any official authorised by ASAC, connected with the record attempt, shall in any circumstances be liable in respect of any injury claim, demand, cost and expenses whatsoever in connection with the event and I agree to identify them against any action, claim, demand, cost and expense in connection there within.

Name:

Signature:

Date:

Please email the completed form to [apf@apf.com.au](mailto:apf@apf.com.au) – Attention Jenny

Once payment (where applicable) is taken, you will be notified of your FAI database license number.

FOR INTERNAL USE ONLY			
Payment Required?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Payment Taken by: (Initials)	
Payment Date:		Other Eligibility Checked: (Initials)	