

Florida Flight Training Center - APPLICATION FOR ACCEPTANCE

Firstname: _____ Date of Birth: _____

Lastname: _____

Street: _____ City: _____

P.O. Box not accepted _____ Zip code: _____

Country: _____ Country of Birth: _____

Country of Citizenship: _____ Phone: _____

Fax: _____

E-mail: _____

Arrival (Date*): _____ Departure (Date): _____

Arrival (Time): _____ Airline: _____

Airport: _____ Flight number: _____

(*Your entry into the U.S. must be no earlier than this date, no later than 30 days after.)

We scheduled a flight instructor on the first day after arrival at 9.00 a.m. Please be on time!
If you want to be picked up from the airport call: Sey Breeze Limo 941-475-1558 or Blue Sky Limo 941-484-9796

On my arrival I want to rent a bicycle (1\$ per day)

Do you want the school to schedule a medical with our doctor: yes no

Medical and physical information and limitation if any:

Pilot Certificate held:

Total logged time and copy of Log Book (last page):

For which Course would you like to enroll: PPL: IFR: FULL COURSE:

Please reserve the following Accommodation for the time mentioned above.

Note: The cost for renting a room, needs to be paid in advance.

US\$ 25.- + 7% sales tax / day

Note: all rooms are subject to availability

Note: If you arrive at the school after 4 p.m. you must check into a hotel for your first night stay, unless other arrangements have been made.

I hereby swear and confirm, that the foregoing information is true and correct.

Date: _____ **Signature:** _____

Please fill form out and then print it!

Finally sign and fax to: 941-483-9022