

OPMF 00 – NEW MEMBERSHIP APPLICATION

APPLICATION INSTRUCTIONS

- Use this form for a new, **first time** application for **Full Membership** to the NZHGPA.
- **Current and previous members** go online to the Members Area to renew your membership.
- **Associate membership** (non-flying) go online to the Membership Area or email the NZHGPA Administrator at admin@nzhgpa.org.nz
- **Student pilots** can choose - Temporary Student Membership using form OPMF01 (available only from your instructor), allows you to fly immediately but only while under instruction.- Or you can apply for Full Membership using this form OPMF00 and wait a few days for your membership card to be returned to you. **Do not fly** until you have either a Student or Full membership in writing.
- Only Full members can apply for permanent pilot certificates (e.g. PG2, HG Novice)
- Details of NZHGPA affiliated Clubs and NZHGPA Fees are available on the NZHGPA web site.
- Those under 18 years old require permission and signature from a Parent or Guardian.

CONTACT DETAILS	PILOT INFORMATION
First Name.....	Date of Birth (dd/mm/yy)
Surname	Gender <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/>
Postal Address.....	Main interest? <input checked="" type="checkbox"/> Paragliding <input type="checkbox"/>
.....	Hang Gliding <input type="checkbox"/>
City	Flight time in past 12 months.....: (hh:mm)
CountryPost Code.....	Joining which Club
Telephone	Your Instructor/School or Prior Overseas Affiliation
Landline: (.....).....
Mobile: (.....).....
Email:	
Emergency Contact Address (Optional)	
.....	

Terms and Conditions of Pilot Membership

WARNING: Under New Zealand law it is extremely unlikely that you will be able to sue anyone if you are injured. The New Zealand's Accident Compensation scheme, provides limited assistance for injury. Visitors to New Zealand are strongly recommended to have full insurance covering injury, illness and cancellation.

1. It is a Civil Aviation requirement that to hang glide or paraglide in New Zealand that all pilots are a bonified member of a hang gliding organisation, CAA Rule 106.5(a).
- 2 I agree to abide by the rules and regulations of the NZHGPA (Inc) and Civil Aviation Authority of New Zealand (CAA), and my local club rules.
3. Membership of the New Zealand Hang Gliding and Paragliding Association (NZHGPA) is limited only to those privileges of membership of a 149 Hang Gliding organisation and the certificate or rating held.
4. As a member you will enjoy the benefits of the NZHGPA's Third Party Insurance policy. Insurance is only valid if your membership fees have been paid and your currency is up to date, at the time of any third party claim.
5. The NZHGPA does not endorse or recommend any one particular school or instructor, a full list can be found on the NZHGPA website at : <http://www.nzhgpa.org.nz/learn-more/paragliding-schools>.
6. It is understood that any training or instructional flight is entered into as a sole arrangement and or agreement, between the member and the school, instructor and or pilot in command of the aircraft providing the training or flight. The NZHGPA is limited to the issuing of certificates, ratings and compliance of Civil Aviation Rules under a voluntary 149 Recreational Aviation Certificated Organisation and is not the provider for your training or instructional flights.
7. The NZHGPA is not liable for any financial loss, travel plans, damage, physical or mental injury of a pilot member. This exclusion is subject to any rights or remedies a customer has under the Consumer Guarantees Act 1993, or any other New Zealand law.

Terms and Conditions Contd

8. I consent to the collection and retention of membership details by the NZHGPA for record-keeping purposes, for the Association to disclose my details to a member’s club, and for my name, membership number and certificate to be published on the Association’s website to enable CAA inspectors and landowners to confirm my flying privileges, and relevant details to be provided to CAA for accident investigations. I acknowledge my right to access and correct this information. This consent is given in accordance with the Privacy Act 2020.

9. **I acknowledge that there is an inherent risk** in participating in the sport of hang gliding and paragliding. I willingly accept all the risks of hang gliding and or paragliding, including without limitation the risks and the possibility of personal injury, death, property damage or loss resulting there from for any reason. I acknowledge that the enjoyment and excitement of hang gliding and or paragliding is derived in part from the freedom of flight and that the inherent risk of flying contributes to such enjoyment and excitement.

10. If under the age of 18 years of age, a parent or guardian must sign this membership application form on behalf of the applicant.

Member Pilot Declaration

I hereby sign to confirm that I am over 18 years of age, have fully read and understood the New Zealand Hang Gliding and Paragliding Association Pilot Membership privileges, restrictions and rules outlined in this form, including the Terms and Conditions of Membership. Furthermore, I declare that I have filled this form in truthfully, disclosing any medical conditions, that I am of sound mind, physically fit and agree to comply with NZHGPA and Civil Aviation Rules pertaining to the sport of hang gliding and paragliding.

Signature **Date**/...../..... dd/mm/yy

Under 18 years old - I the Parent or Guardian hereby give my consent for; Name..... to undertake hang gliding or paragliding training and flight. I have read and understood the Terms and conditions of Pilot Membership and can confirm the Medical Declaration to be correct. As a parent or guardian, I accept there is an inherent risk associated with flying a hang glider or paraglider.

Print Name Signed

Address

Phone number Email Date

Relationship

FEES	PAYMENT OPTIONS <input checked="" type="checkbox"/>	
		or Funds Transfer <input type="checkbox"/> Date of transfer NZHGPA, Westpac Bank Account: 03_0502_0295267_00 * This type of payment is preferred. Please include clear name references with transfer to enable identification of your payment.
Assoc Fee	Credit Card <input type="checkbox"/> <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA	Cardholder Name
Club Fee		Cardholder Signature
IPPI Card?		Credit Card Number _ _ _ _ / _ _ _ _ / _ _ _ _ / _ _ _ _
O’Seas Post?		Expiry Date _ _ / _ _
Total		

FPP – FIT AND PROPER PERSON QUESTIONNAIRE

1. Personal details

(a) Full Name						
(b) CAA Client Number: (if known)						
(c) Date of Birth:				Place of Birth:		
(d) Address for Service: Civil Aviation Act, s8, requires applicants to provide an address for service (ie, a physical address) and to notify the Director of any changes.						
Daytime Telephone:				Mobile Number:		
Email address:						

2. Questionnaire

THE INFORMATION SOLICITED HEREIN IS REQUIRED PURSUANT TO SECTIONS 9 AND 10 OF THE CIVIL AVIATION ACT 1990, WHICH PROVIDES FOR A FIT AND PROPER PERSON TEST TO BE SATISFIED

Have you previously had an application for an aviation document rejected or have you been the holder of an aviation document which has been suspended or revoked ? (other than a licence that has been superseded by a replacement or a higher licence)	Yes*	No
	<input type="checkbox"/>	<input type="checkbox"/>

* If answering "Yes", please give details here:

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(a) Have you been convicted in any court of law of any transport safety offence in the last five years or are you presently facing charges for a transport safety offence?	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>
(b) Have you been convicted on any criminal charge or are you presently facing charges for any criminal offence?	<input type="checkbox"/>	<input type="checkbox"/>
(c) Have you any history of physical or mental health or serious behavioural problems?	<input type="checkbox"/>	<input type="checkbox"/>

*If answering "Yes" to question a, b, or c above, please provide details on separate sheets enclosed in a sealed envelope marked "Confidential, or email in confidence to the NZHGPA Administrator at; admin@nzhgpa.org.nz

3. Declaration

I hereby certify that to the best of my knowledge and belief the statements made and the information supplied in this questionnaire and the attachments are correct. I hereby consent to the disclosure by the New Zealand Police of any details of any convictions I may have pursuant to this application, to the Manager Personnel Licensing, Civil Aviation Authority.

Applicants Signature: Date:

The provision of false information or failure to disclose information relevant to the grant or holding of an aviation document constitutes an offence under Section 49 of the Civil Aviation Act 1990 and is subject, in the case of an individual, to imprisonment for a term not exceeding 12 months or to a fine not exceeding \$5,000.

OFFICE USE ONLY: Applicant assessed Fit and Proper Person Yes [] No []

Signature: date:..... (dd/mm/yy)