

Midland Gliding Club

Annual Check Form

May 2024

***This form should be used for annual check flights for pilots with an SPL or bronze with cross country endorsement. Use separate form for IFP’s and BI instructors. All other pilots are subject to ongoing 3 monthly checks, the format of which is at the discretion of the instructor.***

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| --- | --- |
| **Pilot Name**  |   |
| Hours in last 12 months  |  |
| Launches in last 12 months  |  |
| Logbook EntriesChecked by | Total hours: [Instructor] |

|  |  |  |
| --- | --- | --- |
| **Exercise:**  | **Initial as competent**  | **Date**  |
| Lookout  |   |     |
| General Flying /Circuit |   |
| Threat and Error Management  |   |
| Recognition and Recovery:* Stall
* Stall with wing drop
* Spiral Dive

NB: at least 2 of 3 – indicate which were done |   |   |
| Launch Failures: * Low (straight ahead landing)
* High (abbreviated circuit)
* Gradual Power Failure

Both high and low must be done unless previously done in past 6 months. Indicate which were done. |   |   |

|  |  |
| --- | --- |
| Medical Type  |   |
| Date next medical due  |   |
| **Pilot Declaration:** I have read the current “Standard Operating Procedures” and “Laws and Rules for Glider Pilots” | **Signed:** **Date:**  |
| Annual Check Completed   | Date:Authorised Instructor’s Signature : |