

## RIGHT-SEAT COMPANION REGISTRATION INFORMATION

The Scioto Valley Chapter of the 99s and EAA Chapter 9 are presenting a weekend for the non-pilot at The Ohio State University Airport (KOSU) MedFlight facility, Friday evening, Saturday, and Sunday, Oct. 2, 3 and 4, 2009. The objective of this worthwhile event is to teach the non-pilot emergency procedures and to safely land an aircraft, should the need arise.

The non-pilot will receive approximately 4 hours of ground school to acquire the basics of navigation, radio operation and emergency procedures. They will spend approximately 4 hours in the right seat of ***their own (or a rental) aircraft*** with a certified flight instructor. A debriefing will follow each flight lesson with an experienced pilot. No more than two participants should share an aircraft. Your aircraft is to be on the ramp and available to you from 7:30 a.m. Saturday, Oct. 3 through 3:00 p.m. Sunday, Oct 4. (All times are approximate). Aircraft parking will be available on the ramp at the ODOT, Office of Aviation. Ground school will begin Friday, Oct. 2 at 7:00 p.m. - 9:00 p.m. and be completed on Saturday; 8:00 a.m. – 10:00 a.m. Flight instruction will begin immediately after ground school is completed. Generally, two hours of flying will be completed on each of the two days. *All flying is contingent upon the weather and the event may be canceled. Students may make other arrangements with instructors if desired. All or part of the registration fee may be returned.*

The registration fee includes course materials, the flight instructor, and continental breakfast, snacks and lunch. The ground school only registration fee includes course materials, Saturday continental breakfast, and snacks.

Participation is limited to the first ten (10) to register (for ground school and flying), and is open to both women and men aged 16 and over. Those aged 16 - 18 **must** have parental consent. The registration form must be **postmarked no later than September 25**. Refunds will be made if notification is received prior to the event. **The enclosed Certificate of Insurance must be completed and returned by Oct. 1 (required for flying participants only.)**

If you have any questions, call or email Janie McIntire (740-362-7228), [wjmcintire@cs.com](mailto:wjmcintire@cs.com). For FAQ'S and additional info see: [www.99s-sciotovalley.org](http://www.99s-sciotovalley.org).

*Sponsored by the Scioto Valley Chapter of the 99s Inc., a 501(c)(3) organization and EAA Chapter 9..*

**RIGHT-SEAT COMPANION REGISTRATION FORM**

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

AIRCRAFT MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ N: \_\_\_\_\_

\_\_\_\_\_ I am interested in participating in ground school and flying, (\$99).

\_\_\_\_\_ If course is filled, please place me on standby.

\_\_\_\_\_ I am interested in participating in the ground school only, (\$50).

Mail completed form and check made out to the *Scioto Valley Chapter of the 99s* for the appropriate amount to: Janie McIntire, 71 Greenhedge Circle, Delaware, OH 43015.

**PARTICIPANT'S CERTIFICATE OF INSURANCE**

This is to certify to the Scioto Valley Chapter of the 99s and The Ninety-Nines, Inc. that Policy Number \_\_\_\_\_ has been issued to:

NAME AND ADDRESS OF INSURED:

\_\_\_\_\_

covering in accordance with the conditions thereof, the following aircraft:

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ N \_\_\_\_\_

TYPE OF COVERAGE	LIMITS OF LIABILITY NOT LESS THAN
1.(A) Aircraft Liability Bodily Injury (excluding passengers)	\$100,000.00 each person \$300,000.00 each occurrence
Passenger Bodily Injury (NOTE: \$100,000.00 multiplied by number of certified seats in aircraft).	\$100,000.00 each person
Property Damage	\$100,000.00 each accident
1.(B) In lieu of (A) Single limit bodily injury (including passengers) and property damage	\$500,000.00 each occurrence or accident
2. Aircraft physical damage (hull) optional All risks, not in motion, in motion, ground, in flight	Amount of insurance \$ _____
3. This insurance is in full force and effect with respect to liability arising out of use of this aircraft in connection with the flying event described as the Right-Seat Companion Seminar to be conducted by the Scioto Valley Chapter of the Ninety-Nines, Inc. on Oct. 2 - 4, 2009 in Columbus, Ohio.	
4. It is agreed that in the event of the cancellation of this policy or policies, by the company ten (10) days written notice of such cancellation will be given to you at the following address: Janie McIntire, 71 Greenhedge Circle, Delaware, OH 43015.	

\_\_\_\_\_ by \_\_\_\_\_  
Name of Insurance Company Insurance Company Representative Date

**NOTE: REQUEST A RIDER BE ISSUED TO COVER AN INSTRUCTOR QUALIFIED IN YOUR TYPE OF AIRCRAFT.**