



## WELCOME TO ARDMORE FLYING SCHOOL

### Our Mission:

*"To train pilots to the very highest standard of excellence in aviation, safety, education, competency, command and to achieve their individual, personal and professional aviation goals."*

A		PERSONAL DETAILS						
1	Preferred title:	Ms <input type="checkbox"/>	Miss <input type="checkbox"/>	Mrs <input type="checkbox"/>	Mr <input type="checkbox"/>	Other (Specify): <input type="text"/>		
2	Print your full legal name:	<input type="text"/> <i>First Name</i> <input type="text"/> <i>Middle Name(s)</i> <input type="text"/> <i>Family Name</i>						
3	Preferred first name:	<input type="text"/>						
4	Have you been known by any other name? What was that name?	<input type="text"/>						
5	Date of Birth:	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	Gender:	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Diverse <input type="checkbox"/>
6	Have you studied at Ardmore Flying School before?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If "Yes" write the last year you attended AFS			<input type="text"/>	

B		COURSE DETAILS	
1	Which trial flight programme do you wish to apply for:	<input type="checkbox"/> 3 hour <input type="checkbox"/> 5 hour <input type="checkbox"/> First Solo <input type="checkbox"/> OTHER <input type="text"/> Please specify	
2	When would you like to start your lessons?	<input type="text"/>	

C		HEALTH	
1	Do you hold a current Class 2 Aviation Medical? (ONLY REQUIRED FOR FIRST SOLO) <i>If "Yes", please attach a copy of your medical</i>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
		If "No", please go to this website and select Directory of New Zealand Medical Examiners or contact our enrolments team to organise this. <a href="https://www.caa.govt.nz/medical/medical-home/">https://www.caa.govt.nz/medical/medical-home/</a>	

D		YOUR CONTACT DETAILS	
1	Address and contact details:	Street	<input type="text"/>
		Suburb	<input type="text"/>
		City	<input type="text"/>
		Postal Code	<input type="text"/>
		Phone <i>(preferred method of notification)</i>	<input type="text"/>
		Email	<input type="text"/>

E EMERGENCY CONTACT DETAILS

1	<b>Emergency Contact</b>	<i>Name:</i> <input style="width: 95%;" type="text"/>  <i>Relationship to you:</i> <input style="width: 95%;" type="text"/>  <b>Address:</b> Street <input style="width: 95%;" type="text"/> Suburb <input style="width: 95%;" type="text"/> City <input style="width: 95%;" type="text"/> State <input style="width: 95%;" type="text"/> Postal Code <input style="width: 95%;" type="text"/> Country <input style="width: 95%;" type="text"/> Phone <input style="width: 95%;" type="text"/> Email <input style="width: 95%;" type="text"/> Comments <input style="width: 95%;" type="text"/>
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DECLARATION

**Privacy** - Ardmore Flying School is required to collect and store information from this form to comply with the requirements of the Civil Aviation Authority, Ministry of Education (student statistical returns), New Zealand Qualifications Authority (Record of Learning registration), Tertiary Education Commission, Industry Training Organisations (ATTTO), Ministry of Social Development (confirmation of enrolment and academic outcomes), and Inland Revenue Department (student loan interest rebate). In addition, when required by statute, Ardmore Flying School releases information to Government agencies such as the New Zealand Police, Department of Justice, Ministry of Social Development, and the Accident Compensation Corporation (ACC). In signing this enrolment form you authorise such disclosure on the understanding that Ardmore Flying School will observe the general conditions governing the release of information, as set out in the Privacy Act 1993 and the Post-Compulsory Unique Identifier Code of Practice. You may see any information held about you and amend any errors in that information. To do so, contact the Office Manager.

**Prior Criminal Offences** - This issuance of a NZ CAA Licence is subject to a fit and proper person evaluation. A conviction on any criminal offence may restrict your ability to hold a licence. If you have any doubts or questions regarding this matter, please raise them with the CFI or General Manager of Ardmore Flying School.

**Aviation Services Limited** - In signing this enrolment form you authorise the release of your examination results to Ardmore Flying School. To enable ASL to release your results we must have your written permission in compliance with the Privacy Act 1993 (Principle 11 - Limits of the Disclosure of Personal Information).

**Fees** - In signing this enrolment form you undertake to pay all fees as they become due, which includes Account Closure, Administration, and collection charges associated with debt recovery. Ardmore Flying School's credit policy on withdrawal and refund of fees is listed in the Student Training Contract. For clarity; the Domestic Student Fee, Agent Fee and an Administration Fee are not refundable if the student withdraws from the course at any time following the deposit of funds into the Ardmore Flying School's Trust Account. Please review the Training Contract for refund of practical flight training fees and other fees following the student withdrawal.

**Rules** - In signing this enrolment form you undertake to comply with the published rules and policies of Ardmore Flying School with regard to attendance, academic progress, standard of dress, health and safety, and behavior.

CHECKLIST

**IMPORTANT: PLEASE READ CAREFULLY**  
**We want to ensure your enrolment is processed quickly. Failure to answer any of these questions will result in your enrolment being delayed.**

- Have you:**
- Completed all sections of this form
  - Provided photographic ID (Current passport or drivers license)
  - Signed the Declaration

**Declaration** - I declare that to the best of my knowledge all the information supplied on, and with, this enrolment form is true and complete, I agree to abide by the conditions described above, and I consent to the disclosure of personal information as described above. I have read and understood the Ardmore Flying School flying rules and conditions of hire and agree to abide by them.

<i>Signature</i>	<i>Date</i>

*Office Use Only*

**Entered**

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*Signed* / /  
*Date*