APPLICATION FOR IAC AEROBATIC ACHIEVEMENT AWARD

GLIDER PRIMARY

SMOOTH AWARD



Please print CLEARLY! Provide Name exactly as you wish it to be on the Certificate.								
Pilot's Name:								
Address:								
City/State/Zip:								
IAC Number:	Phone:							
Email:								

COMPLETE THIS SECTION FOR "SMOOTH" AWARD										
					METHOD "A"	METHOD "B"				
FIGURE	CATALOG #	AIRCRAFT	DATE	GRADE	JUDGE NAME & IAC #	QUALIFIES	Grader's name, IAC #, Award level			
1a) 1 TURN SPIN or 1b) Humptybump	1.1.6.3 + 9.11.1.4 8.4.1.1									
2) Loop	7.4.1.1									
3) Wingover	0.0									

То р	urchase comi	merative ite	ms please f	ill in below. Your Certificate an	d first (ever) Patch is	s Free (please indicate if so).
	QTY Requested			Mail completed application to: IAC Headquarte		ters / Achievement Award Application
COST (EA)	QTY	Cost			PO Box 3	3086, Oshkosh WI 54903-3086
PINS (\$7.00)				Or	Make check pa	ayable to: International Aerobatic Club
DECALS (\$3.00)				Email with CC payment	Name on Card:	
PATCH (\$4.00)				to: execdir@iac.org	Card Number:	
	TOTAL COST				Card Exp:	Security Code: