



BOY SCOUTS OF AMERICA

Boy Scouts of America Flying Permit Application

(For a Pack Troop, Team, or Crew)

Retain in council office.

**This completed application must be submitted to the council office
for approval two weeks before the scheduled activity.**

Unit No. _____ City or town _____ District _____

Applies for a permit for a _____ flight on _____
Type of aircraft Date

Name of airport where the flight will **both originate and terminate** _____

Total number of participating youth _____ Total number of participating adults _____

A parent or guardian consent form for each youth participant is attached to this application.

All required pilot documents (see page 2 of this application) are attached.

Aircraft and insurance requirements listed on page 2 of this application are satisfied.

Unit Leader Name _____ Age _____

Address _____

City _____ State _____ Zip _____

Work phone _____ Home phone _____
Area code and number Area code and number

Signature of Unit Committee Chair

Signature of Unit Leader

For council use only: Complete and return a copy to the unit.

Official Flying Permit Boy Scouts of America

Local permit number _____ Date issued _____

Council Stamp

Not official unless council stamp appears here.

Flight Requirements

Type of Flight (check one):

Basic orientation flight. This flight will be within 25 nautical miles of the departure airport, with no stops before returning. The pilot must have at least a Private pilot's certificate, have at least 250 hours' total flight time, be current under FAR 61 to carry passengers, and have a current medical certificate issued under FAR 61. Tiger Cubs, Cub Scouts, Boy Scouts, and Varsity Scouts are restricted to this type of flight.

Advanced orientation flight. This flight will be within 50 nautical miles of the departure airport, and the plane may land at other locations before returning to the original airport. The pilot must have at least a Private pilot's certificate and 500 hours' total flight time, be current under FAR 61 to carry passengers, and have a current medical certificate issued under FAR 61. Only Venturers and Venturing leaders may participate in advanced orientation flights.

Aircraft

Aircraft make and model _____

Only aircraft with an FAA Standard Certificate of Airworthiness are allowed. No experimental aircraft are allowed, whether youth or adult participants are flying.

Aircraft number _____ Date of last annual inspection _____

Owner _____

Insurance

All aircraft to be used must carry at least \$1,000,000 aircraft liability insurance coverage, including passenger liability, with sub-limits no less than \$250,000.

EAA Young Eagle Flights. The EAA will provide all Young Eagle Flight coordinators with an EAA policy number and expiration date for additional coverage over the owner's EAA-required policy level of \$100,000. This additional coverage will satisfy the Learning for Life \$1 million insurance requirement. The pilot must be a current EAA member. EAA insurance telephone number: 800-236-4800 ext. 4822.

EAA number: _____

List all insurance policies that, in combination, satisfy the \$1,000,000 insurance requirement:

Insurance company _____

Amount \$ _____ Policy number _____ Expiration date _____

Insurance company _____

Amount \$ _____ Policy number _____ Expiration date _____

Insurance company _____

Amount \$ _____ Policy number _____ Expiration date _____

Pilot

Name _____ Age _____

Address _____

City _____ State _____ Zip _____

Work phone _____ Home phone _____
Area code and number Area code and number

Type of pilot certificate _____ (attach a copy of current pilot certificate)

Date of pilot medical certificate _____ (attach a copy of current medical certificate)

Pilot's total number of flight hours _____ (250 hours minimum)

**INSTRUCTIONS FOR COMPLETING
FLYING PERMIT APPLICATION FOR
BASIC AND ADVANCED ORIENTATION FLIGHTS**

Unit Leader:

Completes first page and checks on page two the Type of Flight. Turn in the Flying Permit Application and all attachments to your local council for approval and save a copy including all attachments.

Aircraft Owner:

Fills out the page two information about Aircraft and Insurance (may reproduce page two locally as needed for additional aircraft owners).

Pilot:

Fills out the page two information about Pilot (may reproduce page two locally as needed for additional pilots).

Parents:

Read completely and fill out the Consent Form for parents (may reproduce locally as needed for each youth participant). The Medical Release and Waiver of Claims are probably the two parts of the parent CONSENT FORM that will be of greatest interest to parents and the unit leader.

Council:

Review that all information requested has been provided on the Flying Permit Application. Affix Council Stamp at bottom of the first page and make copy of both pages. Return this copy of both pages to the Unit Leader.

Check list:

- A parent or guardian consent form for each youth participant is attached to this application.
- All required pilot documents listed on page 2 of this application are attached (Copy of both the pilot's medical certificate and pilot certificate).
- Pilot total hours required (250 hrs. for Basic Orientation Flight and 500 hrs. for Advanced Orientation Flight).
- Aircraft and insurance requirements listed on page 2 of this application are satisfied.
- All information requested is provided.

CONSENT FORM

APPROVAL BY PARENTS OR GUARDIANS

(For Tiger Cubs, Cub Scouts, Webelos, Boy Scouts, Varsity Scouts, Venturers, and Guests under 21 years of age, participating in a den, pack, team, troop, or crew trip or activity)

First name of BSA member/guest and middle initial

Last name

Address

Birth date (month/day/year)

Additional address (need street address if you have a P.O. box)

City

State

Zip

() _____
Area code and telephone No. (parent's business)

() _____
Area code and telephone No. (home)

APPROVAL

(If two parents/guardians, both need to sign.)

FOR: _____
(Name of activity, orientation flight, outing, trip, etc.)

ON _____
(Date(s))

Father/Guardian Signature _____ **Date** _____

Mother/Guardian Signature _____ **Date** _____

PARENTS OR GUARDIANS

(Please read all the statements on both pages before giving approval for participation in the activity listed above.)
I hereby approve and agree to all of the terms, conditions, and waiver of claims of this CONSENT FORM and certify to its correctness. Further, I agree that this BSA youth member or guest can meet the health and physical fitness requirements of the trip or activity.

Medical Release

In the event of illness or injury occurring to my son or daughter while involved in this trip or activity, I consent to X-ray examination, anesthesia, and/or medical or surgical diagnostic procedures or treatment considered necessary in the best judgement of the attending physician and performed by or under the supervision of a member of the medical staff of the hospital furnishing medical services.

It is understood that in the event of a serious illness or injury, reasonable efforts to reach me will be attempted.

Insurance company _____

Policy No. _____

Physician _____

Telephone No. () _____
Physician

Water Activities

In the event that the trip or activity takes place in total or in part on or near water, I certify that this BSA youth member/guest is (check one):

- Nonswimmer
- Beginner Swimmer
- Advanced Swimmer
- Lifeguard Certificate Holder

All such activities are to be conducted within the safety guidelines as may be appropriate.

Venturer Driver Qualifications

When traveling to a Venturing event under the leadership of an adult tour leader (at least 21 years of age), a Venturer at least 16 years of age may be a driver subject to the following qualifications: (1) six months' driving experience as a licensed driver (time on a learner's permit or equivalent is not to be counted); (2) no record of accidents or moving violations; and (3) parental permission has been granted to leader, driver, and riders.

Waiver of Claims

In consideration of the benefits to be derived from participation in this trip or activity, any and all claims against the Boy Scouts of America, pack, troop, team, crew, and chartered organization, or against the officers, employees, agents, or other representatives of any of them, or any other persons working under their direction

or engaged in the conduct of their affairs, arising out of any accident, illness, injury, damage, or other loss or harm to/or incurred or suffered by the applicant named above or to his or her property, in connection with or incidental to the trip or activity, including preliminary training and travel, are hereby expressly waived by the applicant and the applicant's family or guardians.

For Use by Notary Public If Required

In an effort to provide better child protection, certain states and foreign countries now require all releases covering minors to be notarized. In addition to this, they may also require proof of death if only one parent is living, or approval of both parents and stepparent(s) in the event of divorce/remarriage. If you will be traveling through or going to an area where either or both of these restrictions apply, use the bottom of this form to provide space for additional signatures as required.

Subscribed and sworn before me on this the _____ day of _____ (year) _____

My commission expires: _____ (year) _____

Signature _____
Notary public