UHPC Ulster Hang Gliding and Paragliding Club Membership Renewal / Application Form

Personal Details In Case Surname: Surname First Nan	of Accident Contact
	or Addition Contact
First Nan	9:
	ne:
First Name:	
Address: Relations	ship:
Address:	
Postcode.	
TEL (Home):	
(Work): TEL (Hor	na)·
	no _j .
(Mobile):	
	members must be paid-up members of the British iding and Paragliding Association (BHPA) or have
	nt insurance cover.
BHPA Details	
Membership Number: Expiry Date:	(MM/YY)
Paraglider Details Hang Gli	ider Details
Make: Make:	
Size:	
Size: Size: Pilot Ratings (Please tick appropriate boxes)	
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Pilot Ratings (Please tick appropriate boxes) Paraglidir Rating Elementary Pilot (EP) Club Pilot (CP) Pilot (P) Advanced Pilot (AP) Coach	
Pilot Ratings (Please tick appropriate boxes) Paraglidir Rating Elementary Pilot (EP) Club Pilot (CP) Pilot (P) Advanced Pilot (AP) Coach Senior Coach	
Pilot Ratings (Please tick appropriate boxes) Paraglidir Rating Elementary Pilot (EP) Club Pilot (CP) Pilot (P) Advanced Pilot (AP) Coach Senior Coach Instructor	
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