## FFI Flight Lead Evaluation Form

Name					)ate	
Address/City/State	/ZIP					
Phone	Cell		Ema	il		
EAA#	Pilot Lic Type	e and #	<del></del> ‡		Medical	
EAA # Total Time	Type Time		Formation Ti	me	4-ships	FL
Recommendation:						
qualified, and reco						
FFI Flight Lead/Ch						#
Signature					Date	
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RELEASE/ HOLD	HARMLESS C	N RE\	/ERSE MUST	Γ BE SIGI	NED BEFOR	E FLIGHT.
Evaluation:		Qual	Cond Qual	Unqual	(	Overall
Signals				•	(	Qual
Knowledge						Jnqual
Briefing					·	51.qua
Ground Ope	erations					
Takeoff, Joi						
General Lea						
	au					
Maneuvers	Р.,					
Pattern, Lar	nding					
Debriefing						
Comments: (Conti	nue on rear as	neces	sary)			
Recommendation 1	for Training:					
FFI Check Pilot Pri	inted Name					FFI #
Signature						

## Release/Hold Harmless:

The undersigned Holder/Applicant of/for a Formation Flying, Incorporated (FFI) Flight Lead/Check Pilot Formation Card hereby acknowledges and attests to that he/she is an active member of EAA. I hereby agree to be familiar with and abide by the guidelines of FFI. I further acknowledge and understand that the guidelines of FFI have been established to provide the Holder/Applicant of/for the Card with the minimum information necessary to understand the procedures and signals of formation flying. I further acknowledge and understand that it is my sole responsibility to keep fully informed, current, and aware of all information available from whatever source concerning formation flight. The undersigned recognizes and agrees that no representation or warranties have been made to him/her which are inconsistent with any of the procedures, signals, and policies, as set forth within the Formation Flight Manual (all editions) published by the T-34 Association, Inc., or the Darton International, Inc., video, "Formation Flying-The Art". Further, I hereby acknowledge and recognize that this Formation Card Evaluation does not waive my obligation to abide by all local, state, and Federal rules and regulations. I further recognize that formation flight training and formation flying is inherently dangerous wherein there is a possibility of injury or death, and in consideration of my acceptance of this Formation Card issued by FFI, I, for myself, my heirs, executor, administrators, and assigns do hereby release and forever discharge FFI, its members, officers, directors, employees, suppliers, agents, or representatives of and from any and all claims, demands, losses, or injuries incurred or sustained by me as a result of instruction, training, attending, participating in, practicing for, and traveling to and from activities involving formation flights. Further, I agree to accept any and all financial obligations incurred as a result of medical assistance, hospitalization, and related expenses which may arise out of participation, attendance, practicing for, traveling to and from, or because of engaging in formation flights organized by any named entity or individual named herein.

Printed Name	Date
Signature	

Additional Comments (continued from front side)