

Fly Iowa Challenge Passport Registration

Date of registration _____

Your name _____

Address (street, PO box) _____

City &
State _____ ZIP _____

Telephone Number (Home) _____ (Other _____)

Email Address _____

Pilot Certificate Type: Student Private Commercial ATP (circle)

Date of Birth (you must be 18 as of date of registration or have parental permission enter the Fly Iowa Challenge if under age 18) DOB day/month/year _____

Under 18, parental or guardian permission: "I here-by give my permission for _____
_____ to enter the Fly Iowa Challenge." _____

Signed (Parent or guardian, circle which)

Registration Fee \$25.00 (Includes 12 month Participating Membership in Iowa Aviation Promotion Group) This fee is waived for current members of IAPG.

Payment Options: \$ _____ enclosed with this application
\$ _____ PayPal payment made on FlyIowa.org, click "Fly Iowa Challenge"

Mail application to:

Iowa Aviation Promotion Group
3700 SE Convenience Blvd
Ankeny, IA 50021