

United Flight Systems



20119-A Stuebner Airline Rd., Spring, Texas 77379 | www.unitedflight.com | (281) 376-0357

PILOT INFORMATION SHEET

STUDENT / RENTER INFORMATION

NAME _____		EMAIL _____	
ADDRESS _____			
CITY _____		STATE _____	
ZIP _____		CELL PHONE _____	
EMPLOYER _____		DATE OF BIRTH _____	
DRIVER'S LICENSE # _____	STATE _____	EXPIRES _____	
PILOT CERTIFICATE # _____	TYPE _____	ISSUED _____	
MEDICAL CERTIFICATE	<input type="checkbox"/> YES <input type="checkbox"/> NO	TYPE	ISSUED _____
		<input type="checkbox"/> 1 st CLASS	
		<input type="checkbox"/> 2 nd CLASS	
		<input type="checkbox"/> 3 rd CLASS	
BASIC MED	<input type="checkbox"/> YES <input type="checkbox"/> NO	ISSUED	_____
LIMITATIONS _____			

EMERGENCY CONTACT

NAME _____	RELATIONSHIP _____
CELL PHONE _____	HOME PHONE _____
WORK PHONE _____	EMAIL _____

PREVIOUS FLIGHT EXPERIENCE

- None
- Took Discovery Flight
- Previous Flight Training
- Certified Pilot

ASEL	NIGHT
<small># of HOURS</small> _____	<small># of HOURS</small> _____
AMEL	INSTRUMENT
<small># of HOURS</small> _____	<small># of HOURS</small> _____

ENDORSEMENTS

- Complex
- High Performance
- High Altitude
- Tailwheel
- Flight Review
- Instrument P.C.

_____	DATE RECEIVED
_____	DATE RECEIVED
_____	DATE RECEIVED
_____	DATE RECEIVED
_____	DATE RECEIVED
_____	DATE RECEIVED

YOUR FLIGHT TRAINING GOALS

- I don't know, what are my options?
- Learn to fly & HAVE FUN!
- Learn to fly & be my family's pilot!
- Become Professional Pilot!
- OTHER _____

NEW STUDENT ONBOARDING

- Schedule me for new student onboarding!

Every student comes to United Flight Systems with a different level of knowledge about flight training and what to expect. We would love to sit down and answer all of your questions while also helping you understand what all to expect on your flight training journey. If you would benefit from that discussion, please check the onboarding box and let us know what day and times work best for you!

OPTION 1 DATE & TIME _____	OPTION 2 DATE & TIME _____
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UNITED FLIGHT SYSTEMS – INTERNAL USE ONLY

Reviewed and Entered By: _____	US CITIZEN	<input type="checkbox"/> YES <input type="checkbox"/> NO	RENTER	<input type="checkbox"/> ID	STUDENT	<input type="checkbox"/> PASSPORT OR
	FSP ACCOUNT	<input type="checkbox"/> CREATED		<input type="checkbox"/> LICENSE		<input type="checkbox"/> ID & BIRTH
				<input type="checkbox"/> MEDICAL		CERTIFICATE