

**FLYING PERMIT APPLICATION**

Local Permit No. \_\_\_\_\_ Date Issued \_\_\_\_\_

This application must be filed with local council service center two (2) weeks in advance of scheduled activity for proper clearance.

\_\_\_\_\_ No. \_\_\_\_\_ Town \_\_\_\_\_ District \_\_\_\_\_  
Type of unit

\_\_\_\_\_ hereby applies for a permit and submits plans herewith for an aircraft

\_\_\_\_\_ flight on \_\_\_\_\_ 19 \_\_\_\_\_  
Type of aircraft

Give airport name and location flight will originate and terminate: \_\_\_\_\_

Flight will include \_\_\_\_\_ youth and \_\_\_\_\_ adults.

Have parent or guardian consent forms been secured and attached to application?  Yes

Have pilot documents, as required on the reverse side of this application, been attached to application?  Yes

Leader and unit committee member state that requirements and insurance coverages will meet the national requirements as listed on the reverse side of this application.

Leader's name \_\_\_\_\_ Age \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_  
Signed by member of unit committee

\_\_\_\_\_  
Signed by leader

RETAIN IN COUNCIL SERVICE CENTER

COMPLETE AND RETURN TO UNIT

**OFFICIAL FLYING PERMIT  
 BOY SCOUTS OF AMERICA**

Permit issued to \_\_\_\_\_ No. \_\_\_\_\_  
Type of unit

Town \_\_\_\_\_

\_\_\_\_\_  
Name of leader \_\_\_\_\_ Age \_\_\_\_\_

\_\_\_\_\_  
Address

Date of flight \_\_\_\_\_ Airport location \_\_\_\_\_ Total youth \_\_\_\_\_

Total adults \_\_\_\_\_ Council name and address \_\_\_\_\_

\_\_\_\_\_  
Signed for the council

Local permit No. _____ Date issued _____  <p style="text-align: center;">Council Stamp</p>
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