Tripoli Central Virginia Flight Pre-Approval Form

This form must be completed and submitted to the Tripoli Central Virginia Board of Directors no less than two weeks prior to the anticipated flight.

ALL FLIGHTS ARE SUBJECT TO RSO APPROVAL AT THE LAUNCH SITE AND MAY BE DENIED DUE TO TECHINCAL OR WEATHER RELATED PARAMATERS

Flyer Data

Certification Level (F	lyer of Record)				
Email Address (Subn	nitter)				
Email Address (Flyer	of Record)				
Anticipated Date of F	light				
Team Flight: Yes	No				
			Rocket Data		
First Flight: Yes	No				
Length:		Diameter:		Weight Loaded:	
Recover System:	Drogue Size:		Main Size:		
Motor:					
Will an adapter be used: Yes		No			
If yes, please describ	e:				
Electronics:					
Launch Rail Requirement: 15/15		Unistrut			
Center of Gravity:			How Calculate	How Calculated:	
Center of Pressure:			How Calculate	How Calculated:	
Maximum Altitude:			How Calculate	How Calculated	
Maximum Velocity:			How Calculate	How Calculated:	
Thrust to Weight Rat	io:		How Calculate	How Calculated:	
Descent rate under d	lrogue:		How Calculate	ed:	
Descent rate under n	nain:		How Calculate	ed:	

Name (Submitter)

Name (Flyer of Record)

TRA Number (Flyer of Record)