



**APPLICATION FOR CLUB RE-AFFILIATION TO  
THE BRITISH PARACHUTE ASSOCIATION FOR 2008/9  
(1st April 2008 to 31st March 2009) AND  
CLUB ANNUAL RETURN FOR 2007**

This year's Application for Club Re-Affiliation for 2008 and Club Annual Return for 2007 is in a new format. However, the information required for the Annual Return is exactly the same as in previous years.

The main changes are to the Re-Affiliation part of the form. The majority of Clubs originally Affiliated to the BPA many years ago. Therefore, we may not have comprehensive up-to-date details about Clubs. Also, some Clubs may not be fully aware of the current Conditions for Affiliation (see iv, below).

Please complete **all** sections of this form and return it to the BPA Office as soon as possible after your 2007 parachuting operations have finished. Failure to do so may delay your Re-Affiliation. Please note that the Re-Affiliation fee of £150 should accompany the Re-Affiliation application.

If you have any queries about any of the questions, please do not guess, but contact me and I will do my best to clarify them.

Tony Butler – Technical Officer

**PART 1 - RE-AFFILIATION FOR 2008**

**DETAILS OF OPERATOR**

Legal status of operator (limited company, unincorporated association, etc).....

If the operator is a limited company, state the place of registration and company registration number:

.....

VAT registration number (if applicable).....

Club name (trading name).....

Address:.....

..... Postcode.....

Web-site address: .....

Telephone No(s): ..... day

..... evening

..... alternate

Fax: ..... e-mail: .....

**DROPPING ZONE(S)**

Location OS Sheet No. Grid ref. ....

DZ Address:.....

..... Postcode.....

DZ Telephone No.....

**KEY PERSONNEL**

Number of Directors/Proprietors/Owners ..... Please give details of each below.

**Managing Director/Controlling Operator/Commandant/Proprietor/Owner**

*Unless otherwise requested, the BPA's correspondence to the 'Drop Zone Operator (DZO)' will normally be addressed to this person as the individual with overall control of, and responsibility for, the operation of the Club.*

Name: .....  
Address: .....  
.....Post code.....  
Web-site address: ..... BPA no.....  
Telephone No(s): .....day  
.....evening.....mobile

**Other Director(s) / Proprietor(s) / Owner(s) (1)**

Name: .....  
Specific role or function within the operation (if any) .....  
Address: .....  
.....Post code.....  
Web-site address: ..... BPA no.....  
Telephone No(s): .....day  
.....evening.....mobile

**Other Director(s) / Proprietor(s) / Owner(s) (2)**

Name: .....  
Specific role or function within the operation (if any) .....  
Address: .....  
.....Post code.....  
Web-site address: ..... BPA no.....  
Telephone No(s): .....day  
.....evening.....mobile

**Other Director(s) / Proprietor(s) / Owner(s) (3)**

Name: .....  
Specific role or function within the operation (if any) .....  
Address: .....  
.....Post code.....  
Web-site address: ..... BPA no.....  
Telephone No(s): .....day  
.....evening.....mobile

**If there are more than three other Directors/Proprietors/Owners, please continue on a separate sheet and attach it to this application.**

# OPERATOR'S AGREEMENT

## CONDITIONS OF AFFILIATION AS A BPA CLUB

- 1 a) To be eligible for Affiliation as a 'BPA Club', the applicant operator's Club Members must be current BPA Members. (Except in the case of certain EU parachutists - see BPA Operations Manual, Section 12, Paragraph 1.1.)  
b) BPA Clubs will conduct parachuting in accordance with the requirements of the BPA Operations Manual.  
c) It is required that all persons jumping/training at BPA Affiliated Clubs shall be Members of the British Parachute Association in good standing, except in the case of certain EU parachutists (see BPA Operations Manual, Section 12, Paragraph 1.1).  
d) It is required that all BPA Members at BPA Clubs and the Clubs themselves be covered by BPA third party liability insurance.  
e) BPA Affiliation requires the completion and formal approval by the Council of an Affiliation Application Form and thereafter an Annual Return/Re-Affiliation Form.
- 2 Chief Instructors who are Advanced Instructors of all Affiliated Clubs will automatically become members of the Safety and Training Committee.
- 3 The BPA Council reserves the right to strike off its roll of Affiliated Clubs those which disband, become insolvent or otherwise ineffective, or fail to comply with any of the conditions as stated in Paragraph 1 above.
- 4 The names of Affiliated Clubs will normally be published, together with their addresses and other contact details, in each issue of the BPA's official magazine, 'Skydive the Mag', which is published six times a year.
- 5 All student BPA Membership Subscriptions must be remitted to the BPA Office under the conditions laid down from time to time by the BPA Council.
- 6 No further batches of numbered BPA Student Provisional Membership cards ('numbers') may be issued until the previous batch has been paid for, unless authorised by the BPA accounts department.
- 7 Any change to the original affiliation application (ie, change of Key Personnel/Drop Zone/ Legal status, etc) will require the Club to complete and return an application for Re-Affiliation (BPA Form 135), which must meet the requirements of the Council. Clubs' continuing affiliation will not be prejudiced by any such change pending the next Council meeting providing they have completed and returned Form 135 to the BPA immediately upon such change becoming known to the Club.
- 8 Requirements for Affiliation of a new BPA Club/Centre are set out on BPA Form 148.

### **DECLARATION**

**For and on behalf of the above-named operator (Club) I, as the person in control, hereby apply for British Parachute Association (BPA) Club Re-Affiliation for 2008/9. I accept and agree to abide by the conditions set out above for the Affiliation of my organisation as a BPA Club.**

Signature:.....

Name (block capitals):.....

Position:.....

Date:.....

*If there is more than one person in control, such as in a partnership, each must sign a copy of this declaration.*

**PART 2 - ANNUAL RETURN FOR 2007**

*(BPA Operations Manual - Section 12, paragraph 3.1)*

**(Please complete in BLOCK CAPITALS)**

1. **Name of CLUB**

.....

2. **DESCENTS:**

- a) **Number of Static Line ‘round’ descents in 2007:** .....
- b) **Number of Static Line ‘ram air’ descents in 2007:** .....
- c) **Number of Freefall ‘round’ descents in 2007:** .....
- d) **Number of Student (*below Category 8*) Freefall ‘ram air’ descents in 2007 (*excluding Tandem and AFF Levels 1-8, but including AFF Consolidation descents*):** .....
- e) **Number of Freefall ‘Intermediate Parachutist’ and ‘Experienced Parachutist’ descents in 2007:** .....
- f) **Number of AFF descents in 2007 (*Students only, do not include instructor descents, they are to be included in ‘e’ above*):** .....
- g) **Number of Tandem descents in 2007 (*Student and Instructor are classified as one descent*):** .....
- h) **TOTAL NUMBER OF DESCENTS made at club in 2007. (*Do not include display jumps, as they are to be made on a separate ‘return’*):** .....

3. **STUDENTS TRAINED:**

- a) **Number of ‘Traditional’ ab-initio Students trained in 2007:**  
Male: ..... Female: ..... Total: .....
- b) **Number of ‘RAPS’ ab-initio students trained in 2007:**  
Male: ..... Female: ..... Total: .....
- c) **Number of ‘AFF’ ab-initio students trained in 2007:**  
Male: ..... Female: ..... Total: .....
- d) **Number of ‘Tandem’ ab-initio students trained in 2007:**  
Male: ..... Female: ..... Total: .....
- e) **Total number of BPA Student Provisional and/or Temporary Memberships (*excluding Experienced Temporary Memberships*) issued in 2007:**  
Male: ..... Female: ..... Total: .....

4. **INJURIES** (give total numbers sustained):

a) **Slight** (unfit for parachuting for any period less than 3 weeks)

Male: ..... Female: .....

b) **Medium** (admitted to hospital or rendered unfit for parachuting for at least 3 weeks)

Male: ..... Female: .....

c) **Serious** (detained or likely to be detained in hospital for 2 weeks or more, or required an operation)

Male: ..... Female: .....

Give any additional details of serious injuries not included on original Injury Report: .....

.....  
.....

5. **RESERVE PARACHUTE DEPLOYMENTS ROUND OR RAM-AIR** (give total numbers):

Static Line 'Round' mains: ..... Freefall 'Round' mains: .....

Static Line 'Ram-air' mains: ..... Freefall 'Student' Ram-air mains:.....

AFF:..... Tandem: .....

Non-Student Parachutists: .....

Give details of any of the above that may be useful: .....

.....  
.....  
.....

6. **PART 2 (Annual Return) completed by:**

Name: ..... Status:.....

**NOTE:** If there is any other information you feel is important or would be useful to the BPA or STC, please include on a separate sheet.

7. **PAYMENT DETAILS**

The fee for Re-Affiliation is £150.00. This is for the period 1<sup>st</sup> April 2008 to 31<sup>st</sup> March 2009 inclusive.

I ENCLOSE a Cheque / Postal Order* to the value of £150.00 for 2008/2009 Re-Affiliation Fee made payable to 'BPA LIMITED'	
OR Please debit my MASTERCARD / VISA / VISA ELECTRON / MAESTRO / SOLO card as follows:	
NAME of credit/debit card holder (Print) _____	
Address (If different to above) _____	
Card Number: I I I I I I I I I I I I I I I I I I I I I I	EXPIRY DATE: _____
ISSUE No: (If applicable) _____	SECURITY CODE No: (if applicable) _____
ISSUE FROM DATE: (If applicable) _____	
Signature: _____	Date: _____

**Reminder**

When sending the Re-Affiliation/Annual Return don't forget to include the CAA Application for Renewal of your Parachuting Permission (CAA Form SRG1313).