

# Orange County FLIGHT CENTER

## CLIENT INFORMATION

Name: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ Pager: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer's Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Driver's License # \_\_\_\_\_ Issuing State: \_\_\_\_\_ Social Security # \_\_\_\_\_

Person to notify in case of emergency: \_\_\_\_\_ Telephone #: (\_\_\_\_) \_\_\_\_\_

Relationship: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

## PERSONAL CHECK ACCEPTANCE

In the event my check is returned to Orange County Flight Center from my bank for any reason, a \$10.00 service fee will be charged to my account. I authorize Orange County Flight Center to charge my credit card for services rendered. Major credit card required on file for aircraft rental.

Visa • MC • Disc. • Amex #: \_\_\_\_\_ Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

## PILOT HISTORY

**Certificates currently held:**  
(please circle)

PRIVATE   INSTRUMENT   COMMERCIAL   MULTI   CFI   CFII   MEI   ATP

## FLIGHT TIME

Total flight time \_\_\_\_\_ Flight time last 6 months \_\_\_\_\_ Simulator time \_\_\_\_\_ Multi time \_\_\_\_\_

Date of last flight review \_\_\_\_\_ Date of last medical \_\_\_\_\_

### Copies of:

Pilot certificate    Driver's License    Medical    Flight review    Last page of logbook

Rental Agreement    Aircraft checkout sheet    High Performance

*Training To Live By.*

