

WINGS OF ROGALLO (WOR)

NORTHERN CALIFORNIA HANG GLIDER/PARAGLIDER ASSOCIATION

WOR Instructor Application Form

Name:		
Address:		
Telephone	Work:	Home:
USHGA Number:	Rating:	Expiration Date:
WOR Number:	Instructor Rating:	Expiration Date:
Name of person who gave your ICP?		
Where did you do your apprenticeship?		
Are you an USHGA Observer?	Yes No	Appointed by (Examiner):
<p>1. Describe your experience in basic or advanced instruction. (Use the reverse side and/or attach a separate sheet to answer these questions.)</p>		
<p>2. How many students, and at what level, have you taught in the last:</p> <p style="text-align: center;"> Three (3) Months Six (6) Months Twelve (12) Months Number ____ Level ____ Number ____ Level ____ Number ____ Level ____ </p>		
<p>3. Name the sites where you have taught, including dates for each.</p>		
<p>4. Have any of your students had an accident requiring professional medical attention? Yes No If "Yes," explain including dates.</p>		
<p>5. Have you or any of your students violated any Ed Levin Site Regulations? Yes No If "Yes," explain including dates.</p>		
<p>6. Supply the names of at least two references with their USHGA and telephone numbers.</p>		
<p>Hang Gliding and Paragliding instruction is permitted at Ed Levin Park by authorized WOR instructors, as provided by the <i>WOR Ed Levin Park Hang Gliding/Paragliding Site Procedures</i>, with specific requirements and restrictions as specified in the <i>WOR Ed Levin Park Hang Gliding/Paragliding Instruction Procedures</i>. Completed WOR Instructor applications should be submitted to the WOR Ed Levin Site Committee for review. If you edit a machine-readable version of this document, please save it as Microsoft Word 6 for Windows 95 format.</p> <p>WAIVER. This is to certify that I have read, understand, and agree to follow all of the provisions of the <i>Ed Levin Park Hang Gliding/Paragliding Site Procedures</i> and the <i>Ed Levin Park Hang Gliding/Paragliding Instruction Procedures</i>. I also agree to follow USHGA Part 104 guidelines with equal or higher standards of safety. I understand that failure to comply will result in the suspension of my WOR Instructor approval at Ed Levin and may jeopardize my USHGA rating. Furthermore, I understand that I am responsible for the safety of my students and that if a student injury occurs requiring professional medical attention, my WOR Instructor authorization will be suspended pending Site Committee review.</p>		
Signed:		Date: