# Annex 3 Sporting Code Section 2

## Fédération Aéronautique Internationale

### RECORD CLAIM STATEMENT

#### Pilot Information

- **Surname:** __________________
- **First name:** __________________
- **Nationality:** __________________
- **FAI Sporting License:** __________________ **Validity:** __________________ (DD-Month-YYYY)
- **Name of Crew/Copilot:** __________________________________________________

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### Aircraft Information

- **Registration:** __________________
- **Amateur-Built:** □ yes □ no
- **Manufacturer:** __________________
- **Model:** __________________
- **Weight (ref. 3.1.5):** __________________
- **Weight determined by:** □ Weighing prior to takeoff
  □ Aircraft weight & balance records *(Speed Over a Recognized Course records ONLY)*

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### Powerplant Information

- **Manufacturer:** __________________
- **Model:** __________________
- **Power:** __________________
- **Number of Engines:** __________________
- **Type:** □ Internal Combustion (Group I) □ Rocket (Group IV)
  □ Turboprop (Group II) □ Scramjet (Group V)
  □ Jet (Group III) □ Electric (Group VI)

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### Record Information

- **Class:** □ Aeroplanes □ C-1 Landplanes □ C-2 Seaplanes □ C-3 Amphibians
  □ H Jetlift Aircraft
- **Weight Classification (Sub-Class):** __________________
- **Date of Record (UTC date, DD-Month-YYYY):** __________________
- **Type of Record (ref.):** □ Absolute (4.1), □ Altitude (4.2), □ Distance (4.3),
  □ Efficiency (4.4), □ Greatest Payload (4.5), □ Speed (4.6), □ Time to Climb (4.7)
- **Specific Record (Course):** _______________________________________________
- **Performance:** ____________________________________________________________ *(use units as referenced in paragraph 3.1.9)*
- **Supporting Certificates and Information:** __________________________________

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### NAC Certification

This is to certify that this national record was established in accordance with the rules and regulations of the FAI Sporting Code, General Section and the FAI Sporting Code Section 2, and was properly controlled and measured by qualified officials.

- **NAC Claiming Record:** __________________
- **Name of NAC Official:** __________________
- **Title:** __________________
- **Signature:** __________________
- **Date of Signature:** __________________

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*Stamp/Seal of NAC*
CERTIFICATION OF TAKEOFF
- Form 1 -

Pilot/Aircraft Information

Name of Pilot: ________________________________
Aircraft Registration: ____________________________
Manufacturer: ________________________________
Model: ________________________________

Airport Information

Airport Name: ________________________________
City: ________________________________
Identifier: ________________________________
Latitude: ________________________________
Longitude: ________________________________

Official Certification

I hereby certify that takeoff of the aircraft was accomplished as follows:

Date (UTC date): __________________________
(DD-Month-YYYY)
Time of last contact with surface (UTC): __________________________
(HH:MM:SS)
Time source: ________________________________
Observation taken from: ________________________________

Signature of Airport Authority: ________________________________
Date of Signature: ________________________________
Name: ________________________________
Title: ________________________________
Address: ________________________________
E-mail: ________________________________
Telephone: ________________________________

Please return this form directly to:

Agency stamp
CERTIFICATION OF START
- Form 2 -

Pilot/Aircraft Information
Name of Pilot: ______________________________________
Aircraft Registration: ______________________________________
Manufacturer: ______________________________________
Model: ______________________________________

Start Point Information
Name of Start Point (if applicable): ______________________________________
Identifier (if applicable): ______________________________________
Latitude: ______________________________________
Longitude: ______________________________________

Official Certification
I hereby certify that the aircraft reached the start point as follows:

Date (UTC date): _________________________ (DD-Month-YYYY)
Time at start point (UTC): _________________________ (HH:MM:SS)
Altitude: ______________________________________
Time source: ______________________________________
Observation taken from: ______________________________________

Signature of Aviation Authority: ______________________________________
Date of Signature: _________________________
Name: ______________________________________
Title: ______________________________________
Address: ______________________________________
E-mail: ______________________________________
Telephone: ______________________________________

Please return this form directly to:

Agency stamp/seal

Annex 3 Sporting Code Section 2
### Pilot/Aircraft Information

Name of Pilot: ________________________________
Aircraft Registration: ________________________________
Manufacturer: ________________________________
Model: ________________________________

### Course Information

<table>
<thead>
<tr>
<th>Type of Course:</th>
<th>□ Closed</th>
<th>□ Straight</th>
<th>□ Straight with Control Point(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Length of Course:</td>
<td>____________________ km</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Length Determined by:</td>
<td>□ Measurement of course (attach survey report)</td>
<td>□ Distance calculation using WGS 84 earth model (attach calculation)</td>
<td></td>
</tr>
</tbody>
</table>

### Official Certification

*I hereby certify that the course flown complied with the appropriate record requirements:*

Date of record (UTC date): _______________________ (DD-Month-YYYY)

Signature of Aviation Authority: ________________________________
Date of Signature: ________________________________
Name: ________________________________
Title: ________________________________
Address: ________________________________
E-mail: ________________________________
Telephone: ________________________________

Please return this form directly to:
CERTIFICATION OF TURN / CONTROL POINTS
- Form 4 -

Pilot/Aircraft Information

Name of Pilot: ________________________________
Aircraft Registration: ___________________________
Manufacturer: ________________________________
Model: ________________________________

Turn/Control Point Information and Official Certification

I hereby certify that the aircraft rounded or reached the turn/control point(s) as follows:

<table>
<thead>
<tr>
<th>Point</th>
<th>Name/Identifier:</th>
<th>Date (UTC date):</th>
<th>Latitude:</th>
<th>Time (UTC):</th>
<th>Longitude:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>(DD-Month-YYYY)</td>
<td></td>
<td>(HH:MM:SS)</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>(DD-Month-YYYY)</td>
<td></td>
<td>(HH:MM:SS)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>(DD-Month-YYYY)</td>
<td></td>
<td>(HH:MM:SS)</td>
<td></td>
</tr>
</tbody>
</table>

Time source: ______________________
Observation taken from: ______________________

Signature of Aviation Authority: ____________________________
Name: ____________________________
Title: ____________________________
Address: ____________________________
E-mail: ____________________________
Telephone: ____________________________

Please return this form directly to: ________________

Agency stamp/seal
### Pilot/Aircraft Information

| Name of Pilot: ________________________________ |
| Aircraft Registration: __________________________ |
| Manufacturer: ________________________________ |
| Model: ________________________________ |

### Airport Information

| Airport Name: ________________________________ |
| City: ________________________________ |
| Identifier: ________________________________ |
| Latitude: ________________________________ |
| Longitude: ________________________________ |

### Official Certification

**I hereby certify that landing of the aircraft was accomplished as follows:**

**Date (UTC date):** ___________________  
(DD-Month-YYYY)

**Time of first contact with surface (UTC):** ___________________  
(HH:MM:SS)

**I hereby certify that takeoff of the aircraft was accomplished as follows:**

**Date (UTC date):** ___________________  
(DD-Month-YYYY)

**Time of last contact with surface (UTC):** ___________________  
(HH:MM:SS)

**Time source:** ___________________  

**Observation taken from:** ___________________  

**Signature of Airport Authority:** ________________________________ |

**Date of Signature:** ___________________  

**Name:** ________________________________ |

**Title:** ________________________________ |

**Address:** ________________________________ |

**E-mail:** ________________________________ |

**Telephone:** ___________________  

Please return this form directly to:
Fédération Aéronautique Internationale

CERTIFICATION OF FINISH
- Form 6 -

Pilot/Aircraft Information

<table>
<thead>
<tr>
<th>Name of Pilot:</th>
<th>________________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aircraft Registration:</td>
<td>________________________________</td>
</tr>
<tr>
<td>Manufacturer:</td>
<td>________________________________</td>
</tr>
<tr>
<td>Model:</td>
<td>________________________________</td>
</tr>
</tbody>
</table>

Finish Point Information

| Name of Finish Point (if applicable): | ________________________________ |
| Identifier (if applicable):          | ________________________________ |
| Latitude:                             | ________________________________ |
| Longitude:                           | ________________________________ |

Official Certification

*I hereby certify that the aircraft reached the finish point as follows:*

<table>
<thead>
<tr>
<th>Date (UTC date):</th>
<th>(DD-Month-YYYY)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time at finish point (UTC):</td>
<td>(HH:MM:SS)</td>
</tr>
<tr>
<td>Altitude:</td>
<td>________________________________</td>
</tr>
<tr>
<td>Time source:</td>
<td>________________________________</td>
</tr>
<tr>
<td>Observation taken from:</td>
<td>________________________________</td>
</tr>
</tbody>
</table>

Signature of Aviation Authority:

| ________________________________ |

Date of Signature:

| ________________________________ |

Name:

| ________________________________ |

Title:

| ________________________________ |

Address:

| ________________________________ |

E-mail:

| ________________________________ |

Telephone:

| ________________________________ |

Please return this form directly to:

Agency stamp/seal

Annex 3 Sporting Code Section 2
CERTIFICATION OF LANDING
- Form 7 -

Pilot/Aircraft Information

Name of Pilot: ________________________________
Aircraft Registration: ____________________________
Manufacturer: ________________________________
Model: ________________________________

Airport Information

Airport Name: ________________________________
City: ________________________________
Identifier: ________________________________
Latitude: ________________________________
Longitude: ________________________________

Official Certification

I hereby certify that landing of the aircraft was accomplished as follows:

Date (UTC date): ____________________________
    (DD-Month-YYYY)
Time of first contact with surface (UTC): ____________________________
    (HH:MM:SS)
Time source: ________________________________
Observation taken from: ________________________________

Signature of Airport Authority: ________________________________

Date of Signature: ________________________________
Name: ________________________________
Title: ________________________________
Address: ________________________________
E-mail: ________________________________
Telephone: ________________________________

Please return this form directly to:

Agency stamp/seal
Fédération Aéronautique Internationale

CERTIFICATION OF ALTITUDE
- Form 8 -

Pilot/Aircraft Information
Name of Pilot: ________________________________
Aircraft Registration: __________________________
Manufacturer: ________________________________
Model: ______________________________________

Altitude Information
Type of Record: □ Altitude, □ Altitude with Payload, □ Altitude in Horizontal Flight,
□ Altitude Gain, □ Greatest Payload, □ Time to Climb, □ Time to Climb with Payload

Official Certification

I hereby certify that the altitude was reached as follows:
Altitude reached: ______________________________
Method of determining altitude: □ Altimeter □ Radar
□ Barograph □ Other (describe)
Time of Brake Release (Time to Climb only) (UTC): ________________________ (HH:MM:SS)
Time upon reaching altitude (UTC): ________________________ (HH:MM:SS)
Length of time at altitude: __________________________
Speed at beginning and end (Altitude in Horizontal Flight only, ref. 4.2.3.4):
(Beginning) _____________________ (End) _____________________
Date of record (UTC date): ______________________________ (DD-Month-YYYY)
Signature of Aviation Authority: ________________________________
	Date of Signature: ________________________________
	Name: ________________________________________
	Title: _________________________________________
	Address: ______________________________________
	E-mail: _______________________________________
	Telephone: _________________________________

Please return this form directly to:

Agency stamp/seal
CERTIFICATION OF BAROGRAPH HANDLING
- Form 9 -

Pilot/Aircraft Information

| Name of Pilot: | ________________________________ |
| Aircraft Registration: | ________________________________ |
| Manufacturer: | ________________________________ |
| Model: | ________________________________ |

Barograph Information

| Barograph Make: | ________________________________ |
| Serial Number: | ________________________________ |
| Drum rotation rate or sampling rate: | ________________________________ |
| Date of last calibration: | ________________________________ |

Official Certification

_I hereby certify that the barograph was installed in the aircraft as follows:_

| Location: | ________________________________ |
| Elevation: | __________ Temperature: __________ Altimeter Setting: __________ |
| Date (UTC date): | ________________ (DD-Month-YYYY) |
| Time of starting barograph (UTC): | ________________ (HH:MM:SS) |

_I hereby certify that the barograph was removed from the aircraft as follows:_

| Location: | ________________________________ |
| Elevation: | __________ Temperature: __________ Altimeter Setting: __________ |
| Date (UTC date): | ________________ (DD-Month-YYYY) |
| Time of stopping barograph (UTC): | ________________ (HH:MM:SS) |
| Time source: | ________________________________ |

Signature of Aviation Authority: ________________________________

Date of Signature: ________________________________

Name: ________________________________

Title: ________________________________

Address: ________________________________

E-mail: ________________________________

Telephone: ________________________________

Please return this form directly to:
# CERTIFICATION OF WEIGHT

- Form 10 -

## Pilot/Aircraft Information

| Name of Pilot: | ________________________________ |
| Aircraft Registration: | ___________________________ |
| Manufacturer: | ________________________________ |
| Model: | ________________________________ |

## Weight Information

| Empty Weight of Aircraft: | ________________________________ |
| Weight of Fuel: | + ________________________________ |
| Weight of Payload: | + ________________________________ |
| Weight of Pilot and Crew: | + ________________________________ |
| Weight of aircraft at takeoff: | = ________________________________ |

## Official Certification

_I hereby certify that the aircraft weight was determined as follows:_

- [ ] Weighing prior to takeoff  
- [ ] Aircraft weight & balance records  
  *(Speed Over a Recognized Course records ONLY)*

Date weight was determined (UTC date): ________________________________

(DD-Month-YYYY)

Signature of Aviation Authority: ________________________________

Date of Signature: ________________________________

Name: ________________________________

Title: ________________________________

Address: ________________________________

E-mail: ________________________________

Telephone: ________________________________

Please return this form directly to:
Fédération Aéronautique Internationale

CERTIFICATION OF REFUELLING
- Form 11 -

<table>
<thead>
<tr>
<th>Pilot/Aircraft Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Pilot: ________________________________</td>
</tr>
<tr>
<td>Aircraft Registration: ___________________________</td>
</tr>
<tr>
<td>Manufacturer: ________________________________</td>
</tr>
<tr>
<td>Model: ________________________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Refuelling Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ The flight was accomplished with refueling.</td>
</tr>
<tr>
<td>☐ Place of refueling: ☐ on the ground (specify location): ________________________________</td>
</tr>
<tr>
<td>☐ in flight (specify location): ________________________________</td>
</tr>
<tr>
<td>☐ The flight was accomplished without refueling.</td>
</tr>
<tr>
<td>☐ The fuel tanks were sealed before takeoff.</td>
</tr>
<tr>
<td>☐ The seals were intact at termination of the record attempt.</td>
</tr>
<tr>
<td>☐ The aircraft had no capability to undertake in-flight refueling.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Official Certification</th>
</tr>
</thead>
</table>

I hereby certify that refuelling was accomplished as noted above:

Date of record (UTC date): ________________________________ (DD-Month-YYYY)

Signature of Aviation Authority: ________________________________
Date of Signature: ________________________________
Name: ________________________________
Title: ________________________________
Address: ________________________________
E-mail: ________________________________
Telephone: ________________________________

Please return this form directly to: 

Agency stamp/seal
**CERTIFICATION OF FLIGHT CREW**
- Form 12 -

### Pilot/Aircraft Information

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Pilot</td>
<td></td>
</tr>
<tr>
<td>Aircraft Registration</td>
<td></td>
</tr>
<tr>
<td>Manufacturer</td>
<td></td>
</tr>
<tr>
<td>Model</td>
<td></td>
</tr>
</tbody>
</table>

### Crew Information

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td></td>
</tr>
<tr>
<td>FAI Sporting License</td>
<td></td>
</tr>
<tr>
<td>Validity</td>
<td></td>
</tr>
<tr>
<td>Position/Duties</td>
<td></td>
</tr>
<tr>
<td>On board during the entire flight</td>
<td></td>
</tr>
<tr>
<td>Not on board during the entire flight (specify)</td>
<td></td>
</tr>
<tr>
<td>Name</td>
<td></td>
</tr>
<tr>
<td>FAI Sporting License</td>
<td></td>
</tr>
<tr>
<td>Validity</td>
<td></td>
</tr>
<tr>
<td>Position/Duties</td>
<td></td>
</tr>
<tr>
<td>On board during the entire flight</td>
<td></td>
</tr>
<tr>
<td>Not on board during the entire flight (specify)</td>
<td></td>
</tr>
</tbody>
</table>

### Official Certification

_I hereby certify that the crew information given above is correct and complete:_

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of record (UTC date)</td>
<td></td>
</tr>
<tr>
<td>Signature of Aviation Authority</td>
<td></td>
</tr>
<tr>
<td>Date of Signature</td>
<td></td>
</tr>
</tbody>
</table>

**Please return this form directly to:**

[Agency stamp/seal]