



Submit by mail:
SSA, PO Box 2100
 Hobbs, NM 88241
 Attn: Badge Claims

Submit by e-mail:
 badgeandrecords@ssa.org

SSA State Record Keepers Reporting Form

Submit this form as soon as possible after a new state record has been approved.

I. PILOT AND FLIGHT INFORMATION:

- (a) Date of Flight: _____
- (b) Pilot: _____ (c) Passenger (multiplace): _____
- (d) Record State: _____ (e) Start Location (town or airport): _____
- (f) Sailplane Make/Model: _____

II. RECORD PERFORMANCES:

Performance Type	Performance or Handicap Value	Pilot Category			Sailplane Class (select all which apply)							
		J	F	G	Std	15m	Sports	Open Single	Open Multi	13.5m Class	Ultra Light	
_____	_____											
_____	_____											
_____	_____											
_____	_____											
_____	_____											
_____	_____											

III. OFFICIAL OBSERVER:

Name: _____

Records flown by the State Record Keeper should be verified and reported by the SSA State Governor. If the Governor is the record keeper, and the record is flown by the Governor, the record should be verified by an SSA Director.

For SSA use: Entered on Master Table: _____

Issue of Soaring to be in: _____

Date received by SSA: _____ **STATE RECORD KEEPER** _____