

NAR Rocket Science Achievement Award Application



APPLICANT INFORMATION (Completed by applicant)

Name: _____ <small>First Last</small>	NAR No.: _____
Address: _____ <small>Street Apt.</small>	Expiration Date: _____ <small>Is membership current? (Optional)</small>
_____ <small>City State Zip</small>	
Evening phone no.: (____) _____	Cell phone no.: (____) _____ <small>(Optional)</small>
I, _____, certify that I am a member in good standing of the National Association of Rocketry. I am 18 years of age or older. I understand that I must comply with all applicable rules of the NAR Rocket Science Achievement Award.	
Signed: _____, Date: _____, Location: _____	

Enter achievement data required:

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Post Flight: Motor(s) used: _____
<input type="checkbox"/> <u>Motor is certified</u> <input type="checkbox"/> <u>FAA Waiver available (if required)</u>
Award: <input type="checkbox"/> <u>Faster than sound</u> <input type="checkbox"/> <u>Mile Marker</u> _____ <input type="checkbox"/> <u>Data Downlink</u>
<input type="checkbox"/> <u>Model is stable</u> <input type="checkbox"/> <u>Recovery system deployed</u> <input type="checkbox"/> <u>Safety recovery</u>

Award Affidavit (Completed by witness)

I, the undersigned, being members of the National Association of Rocketry distinct from the applicant, have witnessed the achievement by <small>(Name)</small> _____ <small>(NAR#)</small> _____, of results and data relative to the NAR RSA Award. I attest that the applicant has conducted the requirements for the award, and is a member in good standing of the NAR.		
Name (Printed): _____	Signature: _____	NAR No: _____
Membership Expiration Date: ____ / ____ / ____		Certification Level: _____

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