

(THIS FORM IS AFFECTED BY THE PRIVACY ACT OF 1974 - SEE REVERSE)

CROSS-COUNTRY FLIGHT REQUEST - AERO CLUB <i>(If remarks are necessary, enter on the back of this form)</i>		DATE OF REQUEST	AIRCRAFT <i>(Type/Model/"N" Number)</i>
DEPARTURE DATE	DEPARTURE TIME	DESTINATION	RETURN DATE
PROPOSED ROUTE OF FLIGHT		PROPOSED FUEL STOPS AND ESTIMATED TIMES EN ROUTE	
PASSENGERS			
1		4	
2		5	
3		6	
I understand and will comply with Air Force and Aero Club regulations and policies pertinent to cross-country flights. I will carry only passengers listed and no unauthorized passengers. I will land with at least one hour fuel remaining.			
MEMBER'S NAME <i>(Print or type - Last, First, Middle Initial) AND SSAN</i>			MEMBER'S SIGNATURE
RECEIVED <i>(Date and time)</i>		SIGNATURE <i>(Aero Club Official)</i>	
APPROVED <i>(Date and time)</i>		SIGNATURE <i>(Aero Club Official)</i>	

AF FORM 1583 (SUBSTITUTE) 20051106