

Training Record			
Date	Launches	Remarks	Instructor



Stratford on Avon Gliding Club

Winch Training Record Card

Winch: Skylaunch Doris

Name _____ Membership No. _____

Flying Experience:

Solo (Daily Checks) Solo (Off Checks) Bronze 'C' or above

Category 2 Requirements

All boxes must be signed off by a Winch Instructor

	Instructor Signature	Date
Safety procedures	_____	_____
Use of radio & lights	_____	_____
Explanation & use of controls	_____	_____
Wind speed & glider settings <i>(Skylaunch only)</i>	_____	_____
Pre-launch checks	_____	_____
Post-launch control	_____	_____
Use of the Throttle	_____	_____

Additional Category 1 Requirements

Towing out & winch placement	_____	_____
Parking in the hanger	_____	_____
Daily Inspection	_____	_____
Fuelling	_____	_____
Setting up & shutting down	_____	_____

I certify that, in my opinion, this student has met the standards below:

	Instructor Signature	Date
Category 1	_____	_____
Category 2	_____	_____

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