



TANDEM Registration Form

Black Knights Parachute Centre

www.bkpc.co.uk bkpcinfo@googlemail.com

PLEASE COMPLETE IN BLOCK CAPITALS

BPA No.

Full Name

Address

.....Post Code.....

Tel No.Date of Birth Age.....

Where did you hear about BKPC?Occupation.....

Next of Kin..... Relationship.....

Next of Kin Contact Number

I agree to the Terms and Conditions of the BLACK KNIGHTS PARACHUTE CENTRE. I will attend a briefing on the morning of my parachute descent to have explained to me all the rules and regulations of BKPC Ltd whether contained in the Memorandum and Articles of Associations of BKPC Ltd or elsewhere, and will obey them and all other orders given to me by members and Instructors approved by BKPC Ltd who may be in charge of me at any time. Also that part of payment is made directly to, and for the purpose of contracting and paying my personal Instructor/Camera personnel

In consideration of the Centre providing experienced qualified instructors and staff to supervise my training and involvement as a parachutist I hereby indemnify the Centre, the aforesaid Instructors and other such persons who may be authorised by the Chief Instructor to supervise me. I will not bring or join in bringing any action, claim or proceedings against BKPC Ltd, the British Parachute Association, its members, any of its approved Instructors, packers or assistants who have been authorised by BKPC Ltd as being competent, until such time as an investigation has been instigated and the cause of such accident identified.

PLEASE BE AWARE THIS CAN BE AN ALL DAY EVENT

On commencement of the required training, all payments become non-refundable and I accept that if the jump is cancelled due to the weather or aircraft technical issues, it must be rebooked within 1 month. All Tandem skydives are only valid for twelve months from first arrival.

Signed

Witness Date

Being the mother/father/guardian of the above applicant who is years of age confirm that my permission is given for him/her to carry out parachute training and descents and I agree to the terms of the membership and indemnify the Centre according to the above.

Parent/Guardian (If under 18yrs of age).....

Black Knights Parachute Centre Tandem Training Syllabus

		1 st Visit signatures	
		Student Signature	Instructions Signature
Aircraft Safety	I am aware of how to approach the aircraft safely. I will follow all commands when walking back after landing.		
Aircraft Emergencies	I will obey all commands of my instructor in the event of an emergency.		
Aircraft Exits	Pre-jump body positions (head back, legs back, arch, hands on harness) Exit procedures		
Freefall	I am aware of the importance of a good arched position to a successful skydive I will NOT grab any part of the instructor		
Canopy descent	I will NOT reach behind me and will keep my hands away from all parts of the equipment unless instructed otherwise I will obey the commands of the instructor at all times under canopy I am aware of the importance of in-air landing practices I will inform the instructor if I feel unwell		
Landings	I am aware of the importance of the correct landing position (Standing/Sliding) I am able and WILL lift my legs and feet high for landing		

The Black Knights train all Tandem students to BPA standards.

I understand that there is a serious risk of injury or death regardless of standards of instruction, training and equipment used. I voluntarily accept all the risks associated with my participation in a Tandem Jump. I accept that it is my responsibility to carry out the commands given to me by my instructor at all times, this includes instruction on the ground, in the aircraft and during the parachute descent. I accept that it is my responsibility to actively participate in the landing. I understand that this will involve lifting my legs and feet when told to do so by my instructor when coming into land. I understand the harness will be fitted securely by a qualified person.

I confirm I have been briefed on landing techniques and proven my ability to lift my legs for 5 seconds. I am prepared to carry out a Tandem parachute jump. I have received and fully understood the training given

SIGNATURE:.....

2nd Visit 3rd Visit

Tandem Student Name: Tandem Student Name:

Date of Training: Date of Training: