

**OUGC Cuppers Instructor Declaration form:**

Flight date:

Take off time:

Landing time:

Claimant name:

Instructor name:

IGC file name:

*I confirm that during this flight I acted as a safety pilot and did not take control during the soaring section of the flight (an exception to this is for taking of control to maintain normal safety).*

Instructor Signature:

The OUGC President reserves the right to reject any flight. Appeals may be made to the OUGC Captain ([captain@ougc.org](mailto:captain@ougc.org)).