



# Georgian Bay Airways

## Enrolment Form - Float Training Programs

---

Pilot's Name:

Street Address:

City:

Province:

Postal Code:

Email:

Home Phone:

Cell Phone:

---

*Please complete the following information about your previous flight training.*

Total Time:

Current Licence:

Float Time:

Types Flown:

(Floats only)

---

*How did you learn about the Bush Pilot Program at Georgian Bay Airways?*

Surfing the Web

Facebook

Poster at flying club

Word of mouth

Referred by:

Other:

---

*Which program are you enrolling in today?*

25 hour Bush Pilot Program

50 hour Bush Pilot Program

Float Endorsement

Anticipated start date:

---

I herewith submit a deposit of \$2,000.00 (\$500 for endorsement) to secure a position in the Bush Pilot Program with Georgian Bay Airways Ltd. I understand that this deposit is non-refundable, unless notice of withdrawal is given one month (30 days) prior to the scheduled start date.

Signature:

Date:

---

Please send this form with your deposit cheque or Interac e-transfer to:

Georgian Bay Airways Ltd.

11A Bay Street, Parry Sound ON P2A 1S4

gba@georgianbayairways.com