



Operating Procedures Manual Acknowledgment Log

Complete the fields below to certify you have attended a Safety Briefing for the Air Sailing Gliderport and have read the Air Sailing Gliderport Operating Procedures Manual.

Name (Print) _____

Type of Safety Briefing (check and complete information for all that apply):

_____ Live Safety Briefing Webinar

Date _____

_____ Recorded Safety Briefing Webinar

Date _____

_____ Personal Safety Briefing

Date _____

By Whom _____

Emergency Contact Name _____

Emergency Contact No. _____

I certify the information provided above is true and correct, and I have read and understand the Air Sailing Gliderport Operating Procedures Manual.

Signature _____ Date _____