## **Tripoli Altitude Record Form**

Name			Tripoli #	_ Tripoli #		
Address			Area Code	Phone # _		
City, State, ZIP						
Altitude Achieved			Date			
•	Check appropria _HIJ					
Launch Site Inf	ormation:					
Name of Launc	h		Launch Orgar	_ Launch Organizer		
Date of Launch			Place of Laun	Place of Launch		
Elevation Above	e Sea Level		Temperature	_ Temperature at Launch		
List Motor(s) ar	nd Manufacturer	s				
Motor	Total Impulse	# Used	Manufacturer	Date Code	Stage Number (1,2 etc.)	
Total Impulse o	of all Motors		_ N-SEC # of stag	es		
Mass Rocket: 0	Gross		Empty			
Total Rocket Le	ength:					
Stage 1 Diamet	ter: Sta	age 2 Diamete	r:Stage	e 3 Diameter:		

Method of Altitude Verification:	_ Optical Tracking	JAltimeter O	tner		
For optical tracking only: Baseline Lo	ength				
Tracker 1 Az Elev Tracker	er 2 Az Ele				
Reduction Method	Closure %	book if page against			
Use separate sheet of paper to expl	ain reduction me	inod ii necessary			
For altimeters only: Manufacturer					
Model	Reported Accuracy Flown Altimeter Before? ( Y / N )				
Date of Purchase	_ Flown Altimeter Before? ( Y / N )				
Other: Attach separate sheet of pap	er detailing equip	ment and method used	I.		
Signatures: The individual listed below certifies t device(s) and had a safe descent.	hat the record at	tempt successfully depl	oyed the recovery		
RSO Name	TRA#	Signature			
Date		<b>0</b> .ga.a.o			
best of his/her knowledge. The witne observed the preparation and launch member.  Witness or Launch Official #1					
Name	TRA#	Signature			
Date					
Witness or Launch Official #2					
Name	TRA #	Signature			
Date					
Applicant					
Name	TRA #	Signature			
Date					
Photograph of Rocket Included? ( Y	/ N)Required fo	r all official record atter	mpts		
Drawing with Dimensions Included?	(Y/N) Suggest	ed, but not required.			

A filing fee of \$5.00 (make checks payable to "Tripoli") must be included with this form. Additional information may be requested concerning the record attempt before the flight is recognized as a record. Including a photograph of the rocket is required and a drawing or diagram is encouraged. This form should be postmarked no later than thirty days after the date of the record attempt and sent to the Tripoli Contest and Records Committee at the address below.

Tripoli Contest and Records Committee Tom Rouse 1337 Rimrock Dr. San Jose, Ca. 95120

(Copy this form, as many times as neccessary, for your use.)