

Tripoli Central California

Date _____ Rod/Rail Size _____

RSO Initials: _____

PAD#: _____

Certification Flight? _____ Level 1 2 3 Prefect/TAP Observer: _____

Your Name/City _____ Tripoli/NAR# _____ Current Cert. Level: _____

Rocket Name: _____ Color: _____ 1st Flight of Rocket? _____

Rocket Length: _____ Diameter: _____ Liftoff Weight: _____ Lbs. _____ oz

Rocket Built From: Kit Manufacturer: _____ Custom Modifications: _____

Motor(s): _____ Igniter Type/Ohms: _____

Recovery: Motor Ejection Electronics (main only) Dual Deployment Other: _____

Electronics: _____ Altimeter Reading _____ Ft

I certify that the assembly and installation of this motor is per the manufacturer's printed instructions and that the construction and recovery system of this rocket is per Tripoli Safety rules.

Please sign here: _____ Check here for additional notes on reverse side

LCO Post-Flight Evaluation: Good Flight Motor Failure In Flight Failure Recovery Failure

LCO Comments _____

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