



Examination Certificate
Basic Proficiency

First Name..... Family Name

Address

BMFA No..... A member of the..... Club

This is to Certify that the above has satisfactorily completed an Examination to the standard as required by BMFA for the Multi-Rotor Basic Proficiency.

Signed Date

Please Print Name

Examiner No BMFA No

Model Details (Type, Wingspan, Engine size, etc.)

Check List

Table with 3 columns: Item description, and Done. Items include pre-flight checks, take off and hover maneuvers, and post-flight checks.

This page is to be sent by the Examiner or the Candidate to:
BMFA, Chacksfield House, 31 St Andrews Road, Leicester, LE2 8RE

Signature line

To be retained by the Candidate

Name: BMFA No:

This is to Certify that the above has satisfactorily completed an Examination to the standard as required by BMFA for the Multi-Rotor Basic Proficiency.

Signed Print Name

Date BMFA No Examiner No