



United States Parachute Association*

5401 Southpoint Centre Boulevard
Fredericksburg, Virginia 22407
(540) 604-9740 | (540) 604-9741 (fax)
uspa.org | groupmembers@uspa.org

**Initial Application
as a Foreign Affiliate Group
Member of United States
Parachute Association, Inc.
("USPA")**

The information you provide in this application will be used for listings for the Foreign Affiliate in USPA publications including *Parachutist* and USPA's online directory.

Check here if you do not want the DZ included in a mailing list occasionally sold by USPA.

DROP ZONE INFORMATION (TO BE PUBLISHED)

Name of DZ (as you want it published):

Airport Name:

Airport's City: _____ Airport State/Country: _____

DZ Latitude: _____ DZ Longitude: _____

DZ Physical Address:

City: _____ State/Country and Postal Code: _____

Weekday Phone: _____ Weekend Phone: _____

Web Address:

Email Address:

DROP ZONE INFORMATION (TO BE PUBLISHED)

Distance from Major City/Metro Area (miles/kilometers): _____ Direction (north, south, east, west): _____

City/Metro Area: _____ Distance to Nearest Hotel (miles/kilometers): _____

Number and Type of Aircraft Used at DZ on a Regular Basis:

Instructional Programs Offered (please check):
 AFF IAD SL Tandem

DROP ZONE AMENITIES (TO BE PUBLISHED)

Please report services and facilities regularly available at your DZ. Checking a box means that the facilities are on the DZ or airport property and available for skydiver use.

- | | | |
|--|---|--|
| <input type="checkbox"/> Full-service restaurant, snack bar, or full grill service (does not include vending machines or microwave oven) | <input type="checkbox"/> Bath house or hot shower facilities | <input type="checkbox"/> Load organizers available |
| <input type="checkbox"/> Bunkhouse with beds | <input type="checkbox"/> Swimming pool | <input type="checkbox"/> Swoop pond |
| <input type="checkbox"/> RV spaces with electric hook-ups | <input type="checkbox"/> Skydiving equipment for rent/retail gear sales on the drop zone | <input type="checkbox"/> Freefall video camera flyers for hire |
| <input type="checkbox"/> Designated camping areas on or adjacent to the DZ | <input type="checkbox"/> Full-service FAA-certified rigging services available during business hours | <input type="checkbox"/> Wireless internet/internet access |
| | | <input type="checkbox"/> Packing services |
| | | <input type="checkbox"/> Team Rooms |

DZ NAME: _____

In applying for Group Membership as a Foreign Affiliate, you will be agreeing to the terms of the Foreign Affiliate Pledge set forth below. Please read them carefully. Failure to comply with the terms may result in suspension or removal from the Foreign Affiliate Program by the USPA, forfeiture of fees and cancellation of benefits and services provided by the USPA, or other disciplinary action provided for in the USPA Governance Manual as in effect from time to time.

The individual or entity for whom this Application is completed hereby applies for Group Membership as a Foreign Affiliate, agrees to follow the terms of the Foreign Affiliate Pledge set forth below, and intends this Application, once accepted by the USPA, to be an enforceable agreement that includes the Foreign Affiliate Pledge below and the terms of the USPA's acceptance set forth further below. The individual or entity for whom this Application is completed further agrees that with respect to any dispute, claim or controversy arising under, out of, in connection with or relating to this Agreement, or any course of conduct, course of dealing, statements (oral or written), or actions relating to this Agreement, any action at law, suit in equity or other judicial proceeding for the enforcement of this Agreement, any provision hereof or any rights of the undersigned applicant as a Group Member or Foreign Affiliate of the USPA shall be instituted only in the United States federal courts located in the City of Richmond, Virginia or in the Virginia state courts located in the City of Fredericksburg, Virginia and (along with the USPA) hereby **knowingly, voluntarily, intentionally and with the advice of counsel waives any rights to a trial by jury with respect to any dispute, claim or controversy** based on this agreement, or relating to, arising out of, under, or in connection with, this agreement, or any course of conduct, course of dealing, statements (oral or written), or actions relating to this agreement. This waiver will apply regardless of how any cause of action is denominated and regardless of what relief is sought. If this waiver is ineffective as to one or more causes of action for any reason, this waiver will remain effective as to all other causes of action.

FOREIGN AFFILIATE PLEDGE

The undersigned applicant pledges and agrees to maintain at least one current USPA rated Instructor on the staff of the undersigned applicant at all times. Please provide the name(s) and membership number(s) of your USPA rated Instructor(s):

USPA Membership #	Last Name, First Name	Instructor Rating(s)

The undersigned applicant further understands that granting of Group Membership as a Foreign Affiliate is purely at the discretion of the USPA. The USPA may make its decision to grant an application based upon information and sources that, at its sole discretion, it finds appropriate. The undersigned applicant further understands that the USPA retains the right to suspend or terminate the undersigned applicant's Group Membership in accordance with procedures set forth in the USPA Governance Manual as in effect from time to time, and the undersigned applicant reserves the right to terminate its Group Membership on thirty (30) days' notice to the USPA. Should the undersigned applicant's Group Membership be terminated by the USPA or by the undersigned applicant, there will be no refund of initial application fees or renewal fees.

I certify that the above is true and correct to the best of my knowledge. On behalf of the undersigned applicant, I intend my transmission of any facsimile or scan of a document containing my signature to be the delivery of a document executed with my signature on behalf of the undersigned applicant.

ACCEPTANCE BY THE DROP ZONE OWNER

Name of Drop Zone Owner (individual or entity that is legal owner) _____
Date

Signature of Drop Zone Owner, if an individual, or of authorized agent of Drop Zone Owner, if an entity (i.e., President, Manager, General Partner, etc.), acting on behalf of the above-named Drop Zone Owner

Printed name of the signer above

Title of authorized agent signing on behalf of entity Drop Zone Owner

ACCEPTANCE BY THE USPA

The applicant that has completed and executed the foregoing document is accepted for Group Membership in the USPA as a Foreign Affiliate and shall be afforded the benefits and privileges afforded to Foreign Affiliates set forth in the USPA Group Membership Manual, subject to the other provisions of that Manual, as in effect from time to time (taking into account modifications thereto from time to time), and to the terms of the foregoing Application (including the waiver by the USPA and the applicant of any right to trial by jury).

Witness the signature of the undersigned officer of the United States Parachute Association, Inc., a New York not-for-profit corporation headquartered in Virginia, as of the date set forth below.

USPA, INC.

By: _____

Its: Executive Director _____ Date: _____

