Boy Scouts of America
Flying Plan

This completed application must be submitted with or attached to a tour and activity plan to the council office for review two weeks before the scheduled activity.

Unit No.:_____ City or town: _____ District: _____

Applies for a plan for a ❑ Basic ❑ Advanced orientation Flight on: _____
❑ Tethered balloon Date

Basic orientation flight. This flight will be within 25 nautical miles of the departure airport, with no stops before returning. The pilot must have at least a private pilot's certificate, at least 250 hours of total flight time, be current under FAR 61 to carry passengers, and have a current medical certificate under FAR 61. *Tiger Cubs, Cub Scouts, Boy Scouts, and Varsity Scouts are restricted to this type of flight.*

Advanced orientation flight. This flight will be within 50 nautical miles of the departure airport, and the plane may land at other locations before returning. The pilot must have at least a private pilot's certificate and 500 hours of total flight time. The pilot must be current under FAR 61 to carry passengers and have a current medical certificate under FAR 61. *Only Venturers and Venturing leaders may participate in advanced orientation flights.*

Tethered balloon flight. Flights will be conducted in an open area of at least 200 feet by 200 feet clear of obstructions, utility lines, fences, trees, etc. Permission to use the property has been secured. The maximum above ground limit (height) is 70 feet. The flight must occur between sunrise and sunset.

Name of the airport where the flight will originate and terminate: _____

Describe the area where tethered ballooning will occur: _____
Permission from the landowner to go tethered ballooning has been secured. ❑ Yes ❑ No

Total number of participating youth:_____ Total number of participating adults: _____

❑ A tour and activity plan is attached to this application.
❑ A parent or guardian consent form for each youth participant is attached to this application.
❑ All required aircraft, insurance, and pilot documentation is satisfied.

We certify that appropriate planning has been conducted using the Sweet 16 of BSA Safety, qualified trained supervision is in place, permissions are secured, health records have been reviewed, and adult leaders have read and are in possession of a current copy of the *Guide to Safe Scouting* and other appropriate resources.

_____ _____
Signature of committee chair or chartered organization representative Signature of adult leader

For council use only: Complete and return a copy to the unit.

Official Flying Plan—Boy Scouts of America

Tour and activity plan number: _____ Date issued: _____

Council Stamp/Signatures/Reviewer

Aircraft/Balloon

Owner(s): _____ Date of last annual inspection: _____

Make and model: _____ Number: _____

Standard airworthiness certificate category (normal/utility/etc.): _____

Note: Only aircraft with standard airworthiness certificates may be used for orientation flights. Restricted, limited, light sport, and experimental category airworthiness certificates are not authorized.

Reproduce this page as needed for additional aircraft/pilots.

Insurance

All aircraft owners must have at least $1 million aircraft liability coverage, including passenger liability with sublimits of no less than $100,000. List all insurance policies that in combination satisfy the insurance requirement.

Insurance company: _____

Amount: $_____ Policy number: _____ Expiration date: _____

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Amount: $_____ Policy number: _____ Expiration date: _____

Experimental Aircraft Association (EAA) Young Eagle Flights (ages 8–17): For those EAA members who choose to insure at $100,000 per passenger seat, the EAA automatically provides an additional $1 million liability umbrella policy with sublimits of no less than $100,000. This coverage is in effect only while participating in Young Eagle Flights. The EAA's insurance telephone number is 800-236-4800, ext. 6106.

EAA member number: ____ ____ ____ ____ ____ ____. **We strongly recommend that all orientation flights be conducted in collaboration with local EAA chapter Young Eagle Flights.** To find a local chapter, visit *www.eaa.org/chapters/locator.*

Pilot-In-Command

Name: _____ Age: _____

Address: _____

_____

City: _____ State: _____ Zip code: _____

Phone: _____ Email: _____

Type of pilot certificate: _____ (Attach a copy of current pilot certificate. Balloon pilots must hold a commercial certification.)

Ratings: _____

Pilot medical certificate: ❑ First ❑ Second ❑ Third class (Attach a copy of current medical certificate. Applicable to ALL flights.)

Medical valid until: _____ (date)

Limitations: _____

Pilot's total number of flight hours: _____ (250 hours minimum for basic orientation flights; 500 hours minimum for advanced orientation flights)

Balloon pilot's total number of flight hours: _____ (100 hours minimum)

Notes and FAQs for Completing Flying Plan

Tour Leader

You are responsible for completing the tour and activity plan and this application as required by the local council, obtaining parental consent for all participants, and gathering required insurance information and support material from the aircraft owner and pilot. Tour leaders are responsible for obtaining approval by unit leadership. Tour leaders must submit completed applications to the council at least two weeks in advance of the activity. Councils may require additional time for special activities, and unit leaders completing this application should plan accordingly.

Pilot, Aircraft Owner, and Insurance Information

Attach additional copies of this information for each aircraft or balloon that will be used, each pilot-in-command, and applicable insurance information. Pilot information must include copies of the pilot's current certificate and medical certificate.

Parents/Guardians

A consent form, No. 680-673, for each participant under 21 years of age must be completed by the youth's parent or guardian.

Local Council Office Checklist

Review that all requested information (listed below) has been provided on the application. Affix the council stamp at the bottom of page 1, and return a copy of all pages to the unit leader.

___ Parent or guardian consent form for each youth participant attached to this application

___ A copy of each pilot's certificate and medical certificate attached to this application

___ Pilot total hours required (250 hours for basic orientation flights; 500 hours for advanced orientation flights; 100 hours for tethered ballooning)

___ Aircraft or balloon insurance requirements satisfied

___ Tour and activity plan completed

Tethered balloon guidelines and FAQs can be found here.

FAQs

Q: My pilot certificate number is my Social Security number. May I strike through it or white it out on the required copy?

A: Yes. It is recognized that pilots who have not had their Social Security numbers removed from their pilot certificates may strike out the information.

Q: Our pilot only has the new sport pilot rating. Can he be a pilot-in-command of the orientation flight?

A: No. Sport pilot certificates are not authorized as no medical is required.

Q: Our unit has been offered an orientation flight by the U.S. military, but not all the information required on the application can be obtained. May we still conduct the orientation?

A: Commissioned officers and warrant officers of any armed service may act as pilot-in-command of a military airplane or helicopter in which they are current as the aircraft commander for either a basic or advanced orientation flight. Only the aircraft portion identifying the aircraft as military and a parent or guardian consent form for each youth participant are required.

Q: Since we encourage Young Eagle Flights, can we utilize experimental aircraft?

A: No. Only aircraft with standard airworthiness certificates may be used on orientation flights.

Q: Is an aviation medical required for glider or tethered balloon pilots?

A: Yes. For consistency, a valid medical is required.