

MARYLAND / DELAWARE ROCKETRY ASSOCIATION						
EASTERN SHORE LAUNCH #		DATE:		CERT. LEVEL		
YOUR NAME		ROCKET COLOR		TRA# or NAR#		
ROCKET MANUFACTURER		ROCKET NAME			WEIGHT	
<b>FLIGHT INFO</b> <input type="checkbox"/> CERTIFICATION FLIGHT <input type="checkbox"/> FIRST FLIGHT <input type="checkbox"/> HEADS UP <input type="checkbox"/> OTHER _____ IF OTHER, EXPLAIN		<b>MOTOR DATA</b>			<b>RECOVERY INFO</b> <input type="checkbox"/> MOTOR EJECTION <input type="checkbox"/> ALTIMETER / TIMER <input type="checkbox"/> PARACHUTE <input type="checkbox"/> STREAMER <input type="checkbox"/> OTHER	
		QTY	SIZE	DELAY TIME		
		<input type="checkbox"/> EXPERIMENTAL				
SPECIAL INFO / PURPOSE FOR FLIGHT			<b>FLIGHT RESULT / LCO ONLY</b>			
			<input type="checkbox"/> GOOD		<input type="checkbox"/> LAWN DART	
			<input type="checkbox"/> CERT		<input type="checkbox"/> SEPARATION	
			<input type="checkbox"/> CATO		<input type="checkbox"/> NO CHUTE	

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IF YES

**ROCKET SAFETY CHECKS**

- 
- IS FLYER REGISTERED, ID BADGE / PAYMENT STICKER
  - MOTOR RETENTION - CHECK CERT. LEVEL vs MOTOR IMPULSE
  - RECOVERY DEVICE -
  - NOSE CONE FIT PROPERTY
  - FINS SECURE
  - STRESS CRACKS - IF YES, IS ROCKET SAFE Y/N
  - IS CG AHEAD OF CP - 1 BODY DIA. MIN.
  - FIRST FLIGHT OF ROCKET - IF YES, CHECK BOX ON FRONT
  - IS CG LAUNCH LUGS / RAIL GUIDES SECURE
  - IGNITER OUT OF ENGINE

∅ - G & BELOW,    2 - J/K/L  
 1 - H/I,    3 - M & ABOVE

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**RSO APPROVAL**


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