



## F011A Pilots Medical Self Declaration

**ASRA members undertaking flying activities must comply with the following medical standards to exercise their flying privileges:**

The medical standard and interval are set out in the ASRA Operations Manual section 2.1.10. This Medical Declaration (F011A) is assessed to the standard set by the National Transport Commission & Austroads in their publication "Assessing Fitness to Drive 2022 (as amended) for **Private Vehicle Drivers Standard**" and on their website <https://austroads.com.au/> or [https://austroads.com.au/\\_\\_data/assets/pdf\\_file/0037/498691/AP-G56-22\\_Assessing\\_Fitness\\_Drive.pdf](https://austroads.com.au/__data/assets/pdf_file/0037/498691/AP-G56-22_Assessing_Fitness_Drive.pdf)

- NOTE:**
- Pilots who are unable to make the self-declaration in the F011A must undertake a medical examination by a doctor and complete the F011B instead.
  - **DO NOT USE THIS FORM** if you are a Pilot with an active instructor or higher rating. Use form F010.
  - Specific conditions may require more frequent certification and under certain circumstances "**for cause**" examinations may be required.
  - Return the completed form F011A to the ASRA Registrar, PO Box 50 Hove SA 5048, or email [registrar@asra.org.au](mailto:registrar@asra.org.au)
  - If entering the F011A online, you do not need to send the declaration to the Registrar.

### **F011A - Self Declaration**

I declare truthfully that I am not taking Insulin for the control of Diabetes, and I do not now, and have never suffered from the following:

Epilepsy, Fits, Severe Head Injury, Recurrent Fainting, Giddiness, Blackouts, Uncontrolled High Blood Pressure, Previous Heart Disease, or any condition that could be considered to be detrimental to the safe operation of a Gyroplane.

I further agree that, in the event of my contracting, suspecting or being advised of any of the above conditions, I will cease flying immediately until I have obtained an F011B Medical Certification that it is safe to continue flying.

Membership No: **A** .....

Pilot's Name: .....  
(Please print)

Signature: .....

Date:        /        /

Guardians  
Signature: .....  
(for persons under 18 years)