

# ROBINSON HELICOPTER COMPANY R22/R44/R66 FACTORY MAINTENANCE TRAINING COURSE APPLICATION

Please complete the following application and return with a **legible copy of your mechanic's license (both sides) and photo I.D., along with payment of US\$1,000.00** by U.S. check or money order payable to Robinson Helicopter Company, or VISA, MasterCard or American Express credit card. Applications will not be processed unless accompanied by tuition. **Course is held in English only.** Course reservations are only valid for the mechanic listed on the confirmation letter and are not transferable. Confirmation will be sent by email. Please do not make travel arrangements until confirmation is received.

Name: \_\_\_\_\_  
First (please print or type) Middle Last

Address: \_\_\_\_\_  
Postal Code \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: **(Required for Confirmation)** \_\_\_\_\_

Emergency Contact No.: \_\_\_\_\_

Company You Represent: \_\_\_\_\_

**MUST BE FLUENT IN ENGLISH TO ATTEND - ARE YOU FLUENT IN ENGLISH?** (CIRCLE ONE) YES NO  
**(If NO, you must arrive with an English interpreter for assistance)**

**Mechanic's Signature (Required) X:** \_\_\_\_\_

Mechanic Licenses		Pilot Licenses	
Type	Number	Type	Number
_____	_____	_____	_____
_____	_____	_____	_____

Briefly describe your aircraft maintenance experience, including helicopters (if any): \_\_\_\_\_

What aircraft are operated/maintained by the company you represent? \_\_\_\_\_

Indicate 1<sup>st</sup> Choice Course Date: \_\_\_\_\_ 2<sup>nd</sup> Choice: \_\_\_\_\_

CHARGE MY: VISA  MasterCard  American Express  Check or money order enclosed   
(Payable to Robinson Helicopter Company)

CARD NUMBER: \_\_\_\_\_ EXPIRATION: \_\_\_\_\_  
Security Code

SIGNATURE for CREDIT CARD AUTHORIZATION: \_\_\_\_\_

Course Paid By (e.g., name of student or employer): \_\_\_\_\_  
Name

**MAIL TO:** Maintenance Course Administrator  
Robinson Helicopter Company  
2901 Airport Drive, Torrance, CA 90505  
**EMAIL:** [maintenance\\_course@robinsonheli.com](mailto:maintenance_course@robinsonheli.com)  
**FAX:** 310-534-3693

**Must include legible copies of your govt.-issued Mechanic License (both sides) & Photo ID with Application**

For RHC Use Only

Invoice # \_\_\_\_\_ Rescheduled Date: \_\_\_\_\_ License & ID: \_\_\_\_\_