



**Southern Nevada's Premier Flying Club**  
Henderson Executive Airport (KHND)

[www.DesertFlying.club](http://www.DesertFlying.club)

1420 Jetstream Dr.  
Henderson, NV 89052  
702.990.7656

*To create an aviation community where people can make lasting friendships, fly more economically, and become safer pilots.*

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## **Annual Flight Review, New Member Checkout, Aircraft Checkout What to Expect**

**OVERVIEW:** This Checkout (Flight Check) is intended to ensure you can safely operate DFC aircraft. Please familiarize yourself with the content and requirements. Questions and concerns should be brought to your instructor. Depending on your recency of experience, the checkout may require more than one flight. Safety of our members and their passengers are of primary importance at Desert Flying Club.

### **BEFORE THE FLIGHT CHECK:**

- Ensure your Pilot Certificate, Medical and any other required documentation has been sent to [admin@desertflying.club](mailto:admin@desertflying.club) prior to your check flight.
- Complete a cross country flight plan from KHND to an airport approximately 50-200 NM away (or as directed by your instructor).
- Complete the Aircraft Quiz.
- Compute weight and balance.
- Compute performance calculations for take-off, cruise, and landing based on ambient conditions and weights for the crew and baggage.
- Review weather for the day and be prepared to brief it.

### **FLIGHT CHECK (Successful completion of the flight check is based on ACS standards)**

Bring:

- Your pilot license, current medical, and log book
- Completed aircraft quiz
- Review the POH and have working knowledge of aircraft systems
- Know airspeeds and emergency procedures
- Review Desert Flying Club Operational Rules

### **AFTER THE FLIGHT CHECK:**

- Scan/email your completed Flight Review Form to [admin@desertflying.club](mailto:admin@desertflying.club).



PILOT'S NAME	CERTIFICATE NUMBER

INITIAL SAFETY BRIEFING (if applicable)		
AUTHORIZED OFFICER NAME	SIGNATURE	DATE

Items listed below must be completed.  
Additional items may be completed at instructor's or member's discretion.

I. DISCUSSION	
A. Review Part 91 (CFI discretion)	<input type="checkbox"/>
B. Review Part 61 (currency reqs)	<input type="checkbox"/>
C. Review DFC reqs, operational rules, incl annual proficiency check, 3.11-3.13	<input type="checkbox"/>
D. Review aircraft operations 3.1-3.10 to include: <ul style="list-style-type: none"> <li>• carriage of pets</li> <li>• trash removal</li> <li>• food and drink</li> <li>• items off glare shield</li> <li>• no comm ops ex. flight instruction</li> <li>• maintenance issues, squawks</li> <li>• responsibility to return aircraft</li> <li>• damage to aircraft, IDP, safety committee, board actions</li> </ul>	<input type="checkbox"/>
E. FSP and club billing procedures, recording squawks, concerns to admin@desertflying.club	<input type="checkbox"/>
F. Local procedures, VFR checkpoints, Class B, HND surface ops, local terrain	<input type="checkbox"/>
G. Review Aircraft Quiz	<input type="checkbox"/>
II. PREFLIGHT PREPARATION	
A. Certificates & Documents	<input type="checkbox"/>
B. Obtaining Weather Information	<input type="checkbox"/>
C. Determine Weight & Balance	<input type="checkbox"/>
D. Determine Takeoff Performance	<input type="checkbox"/>
E. Determine Cruise Performance	<input type="checkbox"/>

CERTIFICATE(S) (Mark all that apply)	DATE OF CHECK:
<input type="checkbox"/> Private	AIRCRAFT MAKE & MODEL
<input type="checkbox"/> Commercial	
<input type="checkbox"/> Instrument	TYPE of CHECKOUT
<input type="checkbox"/> CFI <input type="checkbox"/> CFII	<input type="checkbox"/> New Member <input type="checkbox"/> Flight Review
<input type="checkbox"/> MEI <input type="checkbox"/> ATP	<input type="checkbox"/> Aircraft checkout
	FLIGHT TIME:
F. Determine Landing Performance	<input type="checkbox"/>
G. Cross-Country Flight Planning	<input type="checkbox"/>
H. Aircraft Systems	<input type="checkbox"/>
I. I.M.S.A.F.E.	<input type="checkbox"/>
III. GROUND OPERATIONS	
A. Visual Inspection	<input type="checkbox"/>
B. Starting Procedures	<input type="checkbox"/>
C. Taxiing	<input type="checkbox"/>
D. Use of Checklists	<input type="checkbox"/>
E. Passenger Briefs	<input type="checkbox"/>
F. Runup	<input type="checkbox"/>
G. Post Flight	<input type="checkbox"/>
IV. AIRPORT AND TRAFFIC PATTERN	
A. Communication and Light Signals	<input type="checkbox"/>
B. Traffic Pattern Operations, TPA, Vspeeds	<input type="checkbox"/>
C. Airport and Runway Signs and Markings	<input type="checkbox"/>
V. TAKEOFF AND CLIMB	
A. Normal and Crosswind Takeoff and Climb	<input type="checkbox"/>
B. Short Field Takeoff and Climb	<input type="checkbox"/>
VI. MANEUVERS	
A. Power-Off Stalls	<input type="checkbox"/>
B. Power-On Stalls	<input type="checkbox"/>
C. Maneuvering During Slow Flight	<input type="checkbox"/>
D. Steep Turns	<input type="checkbox"/>
E. Change of Airspeed	<input type="checkbox"/>

VII. EMERGENCY PROCEDURES	
A. Emergency Approach & Landing (Sim)	<input type="checkbox"/>
B. Systems & Equipment Malfunction	<input type="checkbox"/>
VIII. APPROACH & LANDING	
A. Normal & Crosswind Landings	<input type="checkbox"/>
B. Go-around	<input type="checkbox"/>
C. Short Field Approach & Landing	<input type="checkbox"/>
IX. SAFETY AWARENESS	
A. Clearing Turns & Collision Avoidance	<input type="checkbox"/>
B. Area Frequencies	<input type="checkbox"/>
C. Fuel Management	<input type="checkbox"/>
D. Stall/Spin Awareness	<input type="checkbox"/>
E. Wake Turbulence Avoidance	<input type="checkbox"/>
F. Runway Incursion Avoidance	<input type="checkbox"/>
G. CFIT	<input type="checkbox"/>
X. AVIONICS & AUTO-PILOT (if equipped)	
A. Audio Panel & Intercom	<input type="checkbox"/>
B. GPS, 430/530/650	<input type="checkbox"/>
C. PFD, ASPEN (if equipped)	<input type="checkbox"/>
D. VOR	<input type="checkbox"/>
E. Xponder	<input type="checkbox"/>
F. A.P. Modes, Disconnect, Power	<input type="checkbox"/>

XI. G1000 OPERATIONS	
A. System Familiarization	<input type="checkbox"/>
B. Flight Plan Setup & Management	<input type="checkbox"/>
C. Auto-Pilot Operation, KAP140	<input type="checkbox"/>
D. PFD Operation	<input type="checkbox"/>
E. MFD Operation	<input type="checkbox"/>
F. Nav/Comm Operation	<input type="checkbox"/>
G. Intercom	<input type="checkbox"/>
H. TIS	<input type="checkbox"/>
I. System Failures (PFD & MFD)	<input type="checkbox"/>

XII. MULTI-ENGINE	
A. Verified Requirements	<input type="checkbox"/>
B. Completed BPPP syllabus	<input type="checkbox"/>

**COMMENTS:**

APPROVED AIRCRAFT	
<input type="checkbox"/> C172	<input type="checkbox"/> DA40
<input type="checkbox"/> PA28-180/181	<input type="checkbox"/> VISX
<input type="checkbox"/> BE-19	<input type="checkbox"/> BE55
<input type="checkbox"/> REMOS	
<input type="checkbox"/> C177B	
<input type="checkbox"/> PA24	

REVIEW OF CERTIFICATES AND DOCUMENTS		
FAA Pilot Cert # and Type	Class Medical and Issue Date	Flight Review Date
<i>I certify that I have read and understand Desert Flying Club Operational Rules &amp; Bylaws and that I will comply with these during my membership. I have completed the Annual Flight Review or New Member Checkout, and Aircraft Checkout as required by Desert Flying Club.</i>		
Date	Member's Name (print or type)	Member's Signature
<i>I certify that I have administered a Flight Check as indicated above and the above-named member has demonstrated proficiency to fly the indicated aircraft.</i>		
Date	Name & Cert. #	Signature