



Name:	Name:
Rack and Pad # (A6, D2, etc.)	Rack and Pad # (A6, D2, etc.)
Rocket Manufacturer:	Rocket Manufacturer:
Rocket Name:	Rocket Name:
Diameter: Length: Color:	Diameter: Length: Color:
Weight	Weight
Motor(s) installed:	Motor(s) installed:
You are liable for any damage or injury caused by your rocket. Are you completely comfortable with the ability of this rocket to fly safely? Comments:	You are liable for any damage or injury caused by your rocket.  Are you completely comfortable with the ability of this rocket to fly safely?  Comments:
To be filled in by LCO: Flight: □ Good / □ Fair / □ Bad Recovery: □ Good / □ Fair / □ Bad Comments:	To be filled in by LCO: Flight: □ Good / □ Fair / □ Bad Recovery: □ Good / □ Fair / □ Bad Comments:
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To be filled in by LCO:  Flight: □ Good / □ Fair / □ Bad  Recovery: □ Good / □ Fair / □ Bad  Comments:	To be filled in by LCO:  Flight: □ Good / □ Fair / □ Bad  Recovery: □ Good / □ Fair / □ Bad  Comments: