



# m2 multi Activation Report

## 1. EVENT IDENTIFICATION

- **Date and time of activation (local):** \_\_\_\_\_
  - **Date of report:** \_\_\_\_\_
  - **Location of activation (DZ name / ICAO code / Country):**  
\_\_\_\_\_
  - **Altitude of activation (AGL / AMSL):** \_\_\_\_\_
  - **Video or flight data available:**  Yes  No (attach files if available)
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## 2. PARACHUTIST INFORMATION

- **Full name:** \_\_\_\_\_
  - **Contact (email / phone):** \_\_\_\_\_
  - **No. of jumps:** \_\_\_\_\_
  - **Jumps in the last 12 months:** \_\_\_\_\_
  - **Height:** \_\_\_\_\_
  - **Weight:** \_\_\_\_\_
  - **Experience level:**  Student  Intermediate  Expert  Tandem Master   
Other: \_\_\_\_\_
  - **Injuries or damages sustained:**  None  Yes – describe:  
\_\_\_\_\_
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## 3. EQUIPMENT INFORMATION

- **Container manufacturer / model:** \_\_\_\_\_
- **Production date of the main parachute:** \_\_\_\_\_
- **Main parachute type and size / number of jumps** \_\_\_\_\_
- **Reserve parachute type and size:** \_\_\_\_\_
- **Production date of the reserve parachute:** \_\_\_\_\_
- **Date of last reserve repack:** \_\_\_\_\_
- **Applied system of main parachute opening:**  Hand-held parachute  Manual Ricord.  Static line  Other: \_\_\_\_\_
- **Main deployment altitude (m/ft):** \_\_\_\_\_
- **Did the main parachute open correctly?**  Yes  No  Partial – describe:  
\_\_\_\_\_
- **Was the reserve ripcord pulled by jumper?**  Yes  No → **Altitude (m/ft):**  
\_\_\_\_\_

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#### 4. m2 MULTI AAD INFORMATION

- **Profile setting:**  Student  Intermediate  Professional  Canopy Piloting  Tandem
  - **Production date:** \_\_\_\_\_
  - **Serial number:** \_\_\_\_\_
  - **Installed by:** \_\_\_\_\_
  - **Cutter serial number:** \_\_\_\_\_
  - **Date of installation in the container:** \_\_\_\_\_
  - **Was the reserve loop cut after activation?**  Yes  No
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#### 5. AIRCRAFT & FLIGHT DETAILS

- **Aircraft type:** \_\_\_\_\_
  - **With or without doors:** \_\_\_\_\_
  - **Pressurized cabin:**  Yes  No
  - **Type of door / exit:**  Side door  Ramp  Other: \_\_\_\_\_
  - **Did the aircraft descend before climb?**  No  Yes – drop in altitude: \_\_\_ m / ft
  - **Maximum altitude reached (AMSL):** \_\_\_\_\_
  - **Exit altitude (AMSL / AGL):** \_\_\_\_\_
  - **Exit order:** \_\_\_\_\_
  - **Flight phase when activation occurred:**  
 On ground  During climb  During level flight  During descent  In freefall  After main opening  After reserve opening
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#### 6. ACTIVATION DETAILS

- **Ground temperature (°C):** \_\_\_\_\_
- **Wind direction / speed on ground (° / m/s):** \_\_\_\_\_
- **Temperature and wind at exit altitude:** \_\_\_\_\_
- **Cloud base (AGL):** \_\_\_\_\_
- **Dropzone elevation (AMSL):** \_\_\_\_\_
- **QNH / QFE (hPa):** \_\_\_\_\_
- **Weather summary:**  Clear  Partly cloudy  Overcast  Rain  Strong wind  Other: \_\_\_\_\_
- **Time from exit to activation (approx.):** \_\_\_\_\_
- **Activation altitude (AGL):** \_\_\_\_\_

- **Body position at activation:**  Stable  Head-down  Back-fly  Spin  Other: \_\_\_\_\_
  - **How did the m2 multi activate?**  Normal  Unexpected  Unclear
  - **Describe the sequence of events leading to activation in your own words with as many details as possible:**
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## 8. ATTACHMENTS

- Video evidence  Altimeter data  Flight log  Weather data  Photos of installation / container  Witness statements  Other: \_\_\_\_\_
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## 9. CONTACT INFORMATION

- **Report completed by:** \_\_\_\_\_
- **Role / Function:**  Parachutist  Rigger  Instructor  Dropzone Safety Officer  Other: \_\_\_\_\_
- **Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

Please send this completed report and all attachments to [aad@marsjev.cz](mailto:aad@marsjev.cz).

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## 10. GDPR / DATA PROCESSING CONSENT

By submitting this report, I agree that **MarS**, located at Okružní 239, 569 43 Jevíčko, Czech Republic, may collect, store, and process the personal data and technical information provided in this form for the purpose of **safety analysis, product improvement, and customer support related to the m2 multi AAD**.

I understand that my data may be shared with official investigation bodies if necessary for the evaluation of the activation event.

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Signature:** \_\_\_\_\_

*If the report is submitted electronically, typing your name in the signature field shall be considered as your electronic consent.*