

Passenger Air Transport Waiver of Liability

Date: _____

CAIR Flight, Inc., a non-commercial, non-profit, volunteer public service organization and its volunteer pilots(s),

Pilot's name Hereby agree to provide the following pa	-	Co-pilot's name if applicable
lereby agree to provide the following pa		
	assengers:	
	and	
Patient's name		Additional passenger name
ilots, aircraft owners or operators, emp lamage I may suffer, including wrongful laim, now and forever and same shall a	loyees, officer death arising apply to my he	<i>er to me,</i> I agree to hold CAIR Flight, Inc. and its affiliates, is and directors, harmless for any personal injury or property out of said injury. I hereby waive, quit, and remise any such irs and assigns. I understand that flights are operated under ere to those standards. I understand and accept all risks.
		I invalid, the remaining portions shall remain in full force and ad this agreement in its entirety and agree to its terms.
*		
Passenger 1 – Patient's printed name	Minor	Passenger 2 – printed name
*		
Patient's signature (Parent or Legal Gua	rdian*)	Passenger 2 signature
Date Signed		Date Signed
Street Address		Street Address
City, State, Zip		City, State, Zip
Parent, Legal Guardian, or other person	Authorized to a	sign for Minor/Other Individual (proof of guardianship may be required
Printed name		Signatura
		Signature
elies upon contributions which are in part so	blicited through my photogra	der to continue to provide its free community service, CAIR Flight publicity involving my story. In order to contribute to their efforts, I ph and information for promotion and public relations, without
	Passe	enger 1 initials Passenger 2 initials
Please give this complete	ed Passend	er Air Transport Waiver of Liability to Pilot

CAIR Flight, Inc. • 8595 Montravail Circle, Suite 913 • Tampa, FL 33637