

Elevate Aviation Cross Country Tour Waiver

LIABILITY AND EMERGENCY WAIVER

If you are the legal guardian of any learner under the age of 18 please complete this form. If you are over 18 please complete this form on your own.

Permission is granted for:

(Name of Student) PLEASE PRINT

PARENT/GUARDIAN INFORMATION:

Parent/Guardian Name:

Address:

Phone #:

Emergency Phone #:

Please provide the information requested below, as it may be needed in case of an emergency. This information does not modify the information on the emergency card.

Student's Date of Birth

Allergies:

Conditions requiring special consideration (medical/physical):

Primary contact name

Relationship to student:

Phone #:

Work Phone #:

Cell Phone #

Secondary contact name

Relationship to student:

Phone #:

Work Phone #:

Cell Phone #

Liability Waiver- Elevate Aviation is not responsible for any damage to personal property during this event. In consideration for being allowed to participate in this Activity, I release from liability and waive my right to sue Elevate Aviation, their employees, officers and volunteers from any and all claims, including claims of the organizations negligence, resulting in any physical injury, illness (including death) or economic loss I may suffer or which may result from my participation in this Activity, travel to and from the Activity (including air travel), or any events incidental to this Activity

Photo Consent- I grant permission for Elevate Aviation to use photos taken at The Cross Country Tour for promotional purposes, education and to share on social media platforms. Including but not limited to: publicity, copyright purposes, illustration, advertising, and web content. YES or NO (please circle)

SIGNATURE

Company Name:

Position:

Student Name:

Parent/Guardian Name:

Date:

(PLEASE PRINT)

Parent/Guardian Signature: