

# SAFEЕ - South Florida Aviation Fly-in & Educational Expo

Opa Locka Airport KOPF Miami, FL 33054 | <http://SAFEЕflight.com> | [safeeflight@gmail.com](mailto:safeeflight@gmail.com)

## Discovery Flight Registration & Release

### Must be 12+ Maximum 6' 2" or 180 lbs

The following release and waiver is a requirement under Florida Law to enable the SAFEЕ and partner flight schools to allow individuals and children under the age of 18 to fly. If you agree to the release and waiver, please complete the attached form and return it to Operation SAFEЕ Flight, [safeeflight@gmail.com](mailto:safeeflight@gmail.com)

### RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, INDEMNIFICATION AND PARENTAL CONSENT AGREEMENT FOR FLIGHT TRAINING AND INTRODUCTORY FLIGHTS

NOTICE: THIS FORM PROVIDES FOR A RELEASE AND WAIVER OF LIABILITY, AN ASSUMPTION OF RISK, AN INDEMNIFICATION AND PARENTAL CONSENT RELATING TO INDIVIDUALS AND CHILDREN LESS THAN 18 YEARS OF AGE CONSISTENT WITH SECTION 316.0085, FLORIDA STATUTES, WHICH STATUTE PROVIDES FOR LIMITATION OF LIABILITY WITH RESPECT TO PERSONS OF ALL AGES WHO PARTICIPATE IN FLYING AND FLIGHT TRAINING. WHEN SIGNED, THIS FORM IS A CONTRACT WITH LEGAL CONSEQUENCES. PLEASE READ IT CAREFULLY BEFORE SIGNING.

In consideration for the granting of permission to my child/ward under the age of 18 to utilize the Aircraft for participation in an Introductory Flight or Flight Training (the "Activities"), the undersigned, on behalf of my child/ward, does hereby acknowledge and agree as follows:

1. THE RISKS AND DANGERS: I expressly acknowledge and realize the inherent risks and dangers to my child/ward associated with flying and flight training and the possibility of serious physical or mental trauma or injury, disability or

death, as well as property damage, that may knowingly, freely and voluntarily agree to assume any dangers or risks to my child/ward associated with such activities and the social and economic losses that can result from participation in these activities. This includes, but is not necessarily limited to, risks and dangers caused by my child/ward's own actions or inactions; caused by other participants / spectators; dangers arising from surface hazards, equipment failure, safety equipment and weather conditions.

2. THE RELEASE AND WAIVER: I do hereby agree to release, waive, discharge and covenant not to sue American Flight Training, the South Florida Fly-In and Educational Expo, partner schools, nor Orion Jet Center; its officers, agents, employees and volunteers (the "Releasees") for any and all claims, damages, injuries, losses or other liabilities that may be sustained by my child/ward, my/our heirs, executors, administrators, legal representatives, successors and assigns directly or indirectly in connection with, or arising out of, my child/ward's participation in flying or flight training activities at the Opa Locka Airport, whether caused in whole or in part by the negligence of Releasees, to the fullest extent permitted by law.

3. THE INDEMNIFICATION AND HOLD HARMLESS: I, for my child/ward, as well as for my/our heirs, assigns, personal representatives and next of kin, do hereby indemnify and hold harmless to sue American Flight Training, the South Florida Fly-In and Educational Expo, partner schools, nor Orion Jet Center, its officers, agents, employees and volunteers, from any and all claims, damages, injuries, losses or other liabilities incurred by my child/ward, or by any third parties, arising incident to my child/ward's participation in flying or flight training at the Opa Locka Airport, even if arising in whole or in part from the negligence of Releasees.

Initial: \_\_\_\_\_

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THE UNDERSTANDING: I, the undersigned, on behalf of my child/ward named herein, have read this Release and Waiver of Liability, Assumption of Risk, Indemnification and Parental Consent Agreement, fully understand its terms, understand that I have given up substantial rights by signing it and sign it freely and voluntarily without any inducement and intend it to be a complete and unconditional release of any and all liability to sue American Flight Training, the South Florida Fly-In and Educational Expo, nor Orion Jet Center, its officers, agents, employees and volunteers, to the fullest extent permitted by law. I further agree that if any part of this contract is held to be invalid, the rest not withstanding shall continue in full legal force and effect.

## 6. PHYSICAL FITNESS AND

EMERGENCY TRANSPORTATION: I attest that my child/ward is physically fit to participate in the indicated activities; and that I desire for them to participate in these hazardous activities and do hereby consent to such participation. Further, I give permission for American Flight Training, the South Florida Fly-In and Educational Expo its officers, agents, employees or volunteers, to arrange for transportation to a hospital in the event of an injury, for which I will be financially responsible, although I understand that the Releasees assume no responsibility to do so.

7. THE AGREEMENT: The signature below indicates agreement to the foregoing terms and conditions for use of the aircraft. I, as the candidate or parent/guardian of a minor, understand the nature of the activities at the Airport and the child's/ward's experience and capabilities and believe to be able to participate in such activities. I hereby give my permission for my child/ward to participate in the activities and further agree, individually and on behalf of my child/ward, to be bound by the terms of the above Agreement.

## Pilot Candidate Information:

Full Legal Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Legal Address: \_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Sponsor: \_\_\_\_\_

## If Candidate is under 18:

Parent's/Guardian's Name: \_\_\_\_\_

Parent's/Guardian's Address: \_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent's/Guardian's Emergency Phone Number: \_\_\_\_\_  
\_\_\_\_\_

Parent's/Guardian's Driver's License Number: \_\_\_\_\_  
\_\_\_\_\_

Parent's/Guardian's Signature: \_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_