



Club de vol libre Yamaska

VISITOR REGISTRATION FORM

2021-22 Season

This form must be signed and witnessed

First and Last Name :		Date :
Address :		Postal Code :
City :		Province :
Email :		Cell Phone :
HPAC Number :		HPAC Level:
Cumulative Flight Hours:		HAGAR:
Hanglider <input type="checkbox"/>	Model and Color :	
Paraglider <input type="checkbox"/>		
Contact in Case of Emergency:		Phone:

We respect your privacy, to authorize us to contact you via email please check this box

The daily fee as a visitor is \$20 (taxes included and non reimbursable). For pilots living closer than 160 km as the crow flies from CVLY, a limit of three (3) visits is established, starting with the first visit after May 1st of the current year.

Mode of payment: Interac Transfer (preferred mode) Cash

AS A VISITOR PILOT YOU MUST COMPLY WITH THE CLUB RULES AND SIGN THE FOLLOWING DISCLAIMER OF LIABILITY:

I, the undersigned, _____, hereby request
Full name in block letters

permission to practice free flight on the site (s) operated by the CLUB DE VOL LIBRE YAMASKA INC., by 9054-1913 Québec Inc. (hereinafter the "Operators") or by 9174-1090 Québec Inc. (owner of the south takeoff).

I fully recognize that the practice of free flight has inherent dangers and risks, some resulting from the very nature of free flight, others resulting from human errors or negligence on the part of participants, and others resulting from circumstances and the physical environment. I freely accept to assume these risks, regardless of their severity or predictability, and accept any consequences resulting therefrom.

I have read and agree to abide by the rules of the site (s) mentioned above. Operators do not undertake any obligation of security. Operators undertake only to provide access to takeoff and landing sites where the free flight has already been successfully practiced, and access to installations including the club house, toilets, etc. that I may use during my visit. My vehicle will be under my responsibility at all times.

The decision to practice free flight will be mine only, and this after having personally verified, before each flight, that all conditions conducive to safely practicing free flight are present and favorable. In consideration of the permission granted to me, I forfeit forever my right to any claims for damages or injury that I may incur or that my equipment could incur, resulting from the storage, preparation or practice of free flight, against the Operators, owners or landlords of take-off, landing and storage sites, as a result of any cause, including the fault or negligence of that person, or persons under their control. With regard to the damage that I could cause by my preparation, or practice of the free flight, either by my inadvertence or my negligence or by any other cause, I assume full responsibility for such damages, and for that reason I have a liability insurance, valid and in force with:

HPAC Member Number : _____

This document is valid until the written repeal served on Operators by registered mail. Any provision of this Agreement that would be contrary to law will be the only one rescinded and will not have the effect of nullifying other provisions of the Agreement that will remain in effect.

I sign showing my commitment, confirming that I've read and understand the consequences of this Agreement.

Signed at: _____ on this _____
Location Date

Signature : _____

This form must be signed by a CVLY member in good standing as witness.

CVLY Witness Name: _____

Signature: _____

Deposit this form and your payment, if applicable, in the letter box intended for this purpose and situated next to the door to the club house.

INTERAC Transfer Instructions :	
Pay to :	tresorier@cvly.ca
Amount:	20\$ (taxes included)
Security question:	Your name – your HPAC Number
Answer to security question:	visitor
It is <u>imperative</u> to use the above answer to the security question.	