



VISITORS REGISTRATION FORM

Please present this form to a club official to receive your authorization

Name: _____ Last Name: _____
 HPAC / USHPA number: _____ Canadian level or equivalent: _____
 Flight hours: _____ HAGAR: _____
 Cellphone number: _____ Email: _____
 Address: _____ ZIP code: _____
 Contact person in case of emergency: _____ Contact Phone: _____
 Hanglider Paraglider Model: _____ Colours: _____

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

The daily fee as a visitor is \$20 (not 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.

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

I, the undersigned, X _____ (in block letters), hereby requests permission to practice free flight on the site (s) operated by the CLUB DE VOL LIBRE YAMASKA INC. by the Co. 9054- 1913 Québec Inc. (hereinafter operators) or by the Co. 9174-1090 (owner of the south takeoff).

I recognize that this practice 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 accept to assume these risks, regardless of their severity or predictability.

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 one (s) of the flight (s) and landing (s) where the free flight has already been successfully practiced, and a space for the storage of my equipment. free flight and others. 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 free flight are present and favorable.

In consideration of the permission granted to me, I will forfeit forever any damages or injury that I may incur or that my equipment could incur, resulting from the storage, preparation or practice of free flight, against 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 take the responsibility for it, and for that reason I have a liability insurance, valid and in force with:
HPAC / ACVL or USHPA 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 the Act 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 the present.

Date: _____ Visitor's signature: _____
 CVLY witness name: _____ Witness signature: _____