

**Air Sailing Incorporated**  
**Waiver of Liability**

\_\_\_\_\_  
Printed Name of Applicant

**WARNING: THIS AGREEMENT WILL AFFECT YOUR LEGAL RIGHTS.  
READ IT CAREFULLY.**

In consideration of Air Sailing Incorporated ("ASI", as defined below) accepting my application for and permitting me to participate in airport and flight operations on lands owned by or under the control of ASI or elsewhere, the following waiver of all claims, release from all liability, assumption of all risks, agreement not to sue and other terms of this agreement are entered into by me with and for the benefit of Air Sailing Incorporated and its Officers, Trustees and Members (collectively, ASI).

I waive any and all claims that I have or may in the future have against, and release from all liability and agree not to sue, ASI and any of its tow pilots, agents, contractors, suppliers and representatives (collectively, the "Personnel") for any personal injury, death, property damage or other loss that I sustain during or as a result of any airport or flight operations due to any cause whatsoever on the part of any one or more of ASI, Personnel or others, including but not limited to:

**negligence** (the meaning of which includes failure to use such care as a reasonably prudent and careful person would use under similar circumstances and failure to meet standards of care in the airport and flight operations industry in the State of Nevada);

**breach of any other duty imposed by law;**

**breach of any contract;** and

**mistakes or errors in judgment** of any kind.

Initials

I am aware of the risks inherent in airport and flight operations and I am aware that airport and flight operations involving gliders and tow planes have certain additional dangers and risks, including but not limited to: adverse weather conditions, high or erratic winds, glider tow operations, a break in the tow rope, and mountainous terrain.

Initials

I assume and accept all the risks and dangers of airport and flight operations, and the possibility of personal injury, death, property damage or other loss as a result. I agree that, although ASI and the Personnel may take precautions to reduce the risks and increase the safety of airport and flight operations, it is not possible for ASI or the Personnel to make airport and flight operations completely safe. I willingly accept these risks and agree to the terms of this ASI Waiver of Liability even if ASI or any of the Personnel are found in law to be negligent or in breach of a duty of care or any other obligation to me in their conduct of any airport or flight operation.

Initials

**WARNING: THIS AGREEMENT WILL AFFECT YOUR LEGAL RIGHTS.  
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I agree that any injuries or damages I sustain which arises from my participation in airport or flight operations is a direct consequence of my decision to participate, even if caused by action or negligence of others. I agree that I have made an informed decision to participate after being apprised of the hazardous nature of my participation, and I agree to exercise all possible diligence to assure the safety of myself and of others.

Initials

I agree that I have had adequate time to read and understand this waiver before signing it and I agree that it will be binding upon my heirs, next of kin, executors, administrators, successors, and guardians. I agree this waiver is intended to be as broad and inclusive as is permitted by law and if any portion of this waiver is invalid and/or is declared to be legally unenforceable for any reason, I agree that the balance of the waiver shall continue in full force and effect.

Initials

I confirm that I am over eighteen years of age.

Signed and witnessed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Printed Name of Applicant

\_\_\_\_\_  
Printed Name of Witness

\_\_\_\_\_  
Signature of Parent if above-named Applicant is less than 18 years old.

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Printed Name of Parent if above-named Applicant is less than 18 years old.

\_\_\_\_\_  
Printed Name of Witness

Check one:

- Club Affiliation \_\_\_\_\_
- Non-Owner Insurance (attached)
- Private Aircraft Insurance (attached)
- JROTC
- Student Pilot
- Passenger