**WAIVER AND RELEASE OF LIABILITY FOR MISSION**

1. Flying Wings of Louisiana, a non-commercial, non-profit volunteer public service organization, and its volunteer pilot

hereby agree to provide this passenger(s) with air transportation free of charge, for the passengers convenience in obtaining, assisting with or returning from medical treatment of diagnosis, or for other compelling human needs as are determined suitable for Flying Wings of Louisiana missions.

1. It is understood that Flying Wings of Louisiana pilots are volunteering their services and aircraft to perform this Flying Wings of Louisiana mission. As such, Flying Wings of Louisiana and those persons acting on its behalf, including mission coordinators, referring agencies, board members, pilots, and all others associated with Flying Wings of Louisiana, are relying upon the signing of this Waiver in return for their providing charitable services.
2. **ADULTS**: In consideration for receiving this air transportation free of charge. I agree to **HOLD HARMLESS** Flying Wings of Louisiana, its volunteer pilot(s), and those persons acting on its behalf, including mission coordinator, referring agencies, board members, pilots, and all others associated with Flying Wings of Louisiana who have assisted in arranging Flying Wings of Louisiana transportation, (from any and all liability, including, but not limited to, liability for negligence) for any personal injury or property damage I might suffer, and for any wrongful death action which my heirs and/or my estate might bring arising from my being a passenger on an aircraft provided by Flying Wings of Louisiana, and operated by pilots or others acting on behalf of Flying Wings of Louisiana. **THIS MEANS THAT NEITHER I, NOR MY HEIRS OR ESTATE, MAY PURSUE ANY CLAIM FOR DAMAGES ARISING OUT OF FLYING WINGS OF LOUISIANA VOLUNTEER TRANSPORTATION.**

Minors or Legally Incompetent Individuals: In consideration for receiving this free of charge, and on behalf of the minor/legally incompetent individuals who are to be transported, I agree to **HOLD HARMLESS** Flying Wings of Louisiana, its volunteer pilot(s), and those persons acting on its behalf, including mission coordinator, referring agencies, board members, pilots, and all others associated with Flying Wings of Louisiana who have assisted in arranging Flying Wings of Louisiana transportation, (from any and all liability, including, but not limited to, liability for negligence) for any personal injury or property damage I/we, or the minor/legally incompetent passenger might suffer, and for any wrongful death action which my heirs and/or my estate might bring arising from said minor/legally incompetent individual being a passenger on a flight or ground transportation arranged by Flying Wings of Louisiana. **THIS MEANS THAT ON BEHALF OF THE MINOR/LEGALLY INCOMPETENT INDIVIDUAL, I AM AGREEING THAT NEITHER THE MINOR/LEGALLY INCOMPETENT INDIVIDUAL, NOR HIS/HER HEIRS OR ESTATE, MAY PURSUE AGAINST THOSE PERSONS OR ENTITIES AS DESCRIBED HEREIN ANY CLAIM FOR DAMAGES ARISING OUT OF FLYING WINGS OF LOUISIANA VOLUNTEER TRANSPORTATION.**

THE UNDERSIGNED HEREBY AFFIRMS LEGAL GUARDIANSHIP AND/OR RESPONSIBILITY OVER THE MINOR/LEGALLY INCOMPETENT PASSENGER(S) BEING TRANSPORTED BY FLYING WINGS OF LOUISIANA, AND AGREES TO **INDEMNIFY, SAFE, DEFEND, AND HOLD HARMLESS FLYING WINGS OF LOUISIANA,** ITS VOLUNTEER PILOT(S), AND THOSE PERSONS ACTING ON ITS BEHALF, INCLUDING MISSION COORDINATORS, REFERRING AGENCIES, BOARD MEMBERS, PILOTS AND ALL OTHERS ASSOCIATED WITH FLYING WINGS OF LOUISIANA, REGARDING ANY CLAIM FOR INJURIES, DEATH, OR DAMAGES WHICH SAID MINOR/LEGALLY INCOMPETENT INDIVIDUAL MAY BRING, OR WHICH MAY BE BROUGHT ON THEIR BEHALF(S), AS A RESULT OF BEING TRANSPORTED ON A FLYING WINGS OF LOUISIANA AIRCRAFT OR GROUND TRANSPORTATION.

I hereby consent to the minor/legally incompetent passenger mentioned herein being transported on that Flying Wings of Louisiana arranged transportation.

1. I understand it’s my sole and exclusive responsibility to purchase any flight or accident insurance should I desire to be insured on this flight.
2. In the event any portion of this contract is held invalid, the remaining portion shall remain in full force and effect.

NOTE: THIS RELEASE MAY BE USED, AND IS DEEMED VALID, AS TO ALL FLYING WINGS OF LOUISIANA MISSIONS ON WHICH THE UNDERSIGNED, OR THE MINOR(S)/MENTALLY INCOMPETENT(S) ON WHOSE BEHALF THIS RELEASE IS BEING SIGNED, ARE PASSENGERS.

1. As evidenced by my signature below, I have read this agreement in its entirety and agree to its terms.

(NOTE: One signature will cover the full flight of all adult passengers, a minor/legally incompetent, both parents, or if only one parent is available, that parent, or person with sole legal custody, or the legal guardian/conservator of the minor/legally incompetent passenger)

**X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TO BE SIGNED BY FLYING WINGS OF LOUISIANA MISSION FLIGHT ASSISTANTS,** I have read and understand all of the above. As a Mission Flight Assistant I agree to hold harmless Flying Wings Of Louisiana, its volunteer pilot(s), and those persons acting on its behalf, including mission coordinators, referring agencies, board members, pilots, and all others associated with Flying Wings Of Louisiana, from any and all liability including , but not limited to, liability for negligence for any personal injury or property damage I might suffer, and for any wrongful death action which my heirs and my Estate might bring arising from my being a mission flight assistant on a flight arranged by Flying Wings Of Louisiana. This means that neither I, nor my heirs or Estate, may pursue against those persons or entities as described herein any claim for damages arising out of Flying Wings of Louisiana volunteer transportation.

**X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Photo Release:** I understand that in order to continue providing its free community service, Flying Wings of Louisiana relies upon contributors, which are in part solicited through publicity. In order to contribute to its efforts, I grant Flying Wings of Louisiana permission to take and use my photograph for promotional, public relations and related uses.

**X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Send by US Mail or email to:

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36490 Lucas Dr.

Denham Springs La 70706

[flyingwingsoflouisiana@hotmail.com](mailto:flyingwingsoflouisiana@hotmail.com)

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