## Scenic Helicopter Tour Passenger Waiver

Please read and complete this waiver prior to your helicopter tour. By signing, you acknowledge and accept all terms and conditions outlined below.

Passenger Information
Full Name
Date of Birth
Phone Number
Email Address
Emergency Contact Name
Emergency Contact Phone
Waiver & Release of Liability
l, the undersigned, acknowledge and fully understand that participating in a helicopter tour involves certain inherent risks, hazards, and dangers, including but not limited to those associated with aviation activities.
I voluntarily assume all risks associated with this activity and release the tour operator, pilots, agents, employees, and affiliates from any and all liability, claims, or causes of action arising out of or in connection with my participation.
I confirm that I am physically and mentally capable of participating in this activity. I agree to comply with all instructions, rules, and safety guidance provided.
☐ I have read and agree to the terms & conditions above.
Medical Information
Relevant Medical Conditions or Allergies
Cianotura
Signature
Passenger Signature

Date

If Passenger is Under 18		
Parent/Guardian Name		
	Parent/Guardian Signature	
Pate		