

Cessnas 2 Oshkosh

Formation Flight and Practice Waiver

I, _____, acknowledge and recognize that formation flying is inherently dangerous wherein there is a possibility of injury, death and/or property damage. I acknowledge and recognize that at all times I am Pilot-in-Command of my aircraft and that I am solely responsible for operating it in a safe manner and consistent with all federal laws, rules and regulations applicable to its operation.

In consideration of my acceptance of permission to participate in formation practice I, for myself, my heirs, my executors, administrators and assigns do hereby release and forever discharge Cessnas 2 Oshkosh and any of their representatives of and from any and all claims, demands, losses, or injuries incurred or sustained by me as a result of attending, participating in, practicing for and traveling to and from activities involving formation flights.

Further, I acknowledge that should another pilot, whether he/she holds an instructor certificate or not, be in the aircraft with me, he/she will be functioning as an observer and not as an instructor.

Further, I acknowledge and recognize that no representation or warranties have been made to me that are inconsistent with legal and safe airplane operation, or with any of the procedures, signals and policies set forth in The Formation Flight Manual (any/all Editions) published by the T-34 Association, Inc. or with the formation practice suggestions from the Cessnas 2 Oshkosh group.

Further, I agree to accept any and all financial obligations incurred as a result of the medical care, hospitalization and related expenses, which may arise from participating in, attending, practicing for, traveling to and from or as a result of engaging in formation flights.

Pilot Sign: _____

Witness Name: _____

Date: _____

Witness Sign: _____