

## Finger Lakes Soaring, Inc.

## GUEST MEMBERSHIP APPLICATION

<u>Name:</u>	<u> </u>			
Address:	City:	St	ZIP	
EMAIL:	Phone:	SSA#		:
Glider Rating: Private: ( ) C	ommercial: ( ) CFIG: ( )			
Insurer:				:
Glider Flying Experience: <u>Total</u> <u>Last 90 days</u>	Flights Hours ( ) ( )			

## **GUEST MEMBERSHIP**

A Guest Member must be a member of an internationally recognized gliding organization (SSA, BGA, etc.) who is a glider rated pilot wishing to use club towing services during a visit of 30 days or less. Guest members are required to supply proof of insurance, complete a Guest Member Application (this form), and to successfully complete a checkout by a club instructor. Guest members pay no dues, cannot operate club equipment and have no voting rights. You will be charged for each tow taken at normal club rates.

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## FINGER LAKES SOARING CLUB, INC.

I hereby apply for membership in the Finger Lakes Soaring Club ("the Club") which I know to be a charitable organization. If accepted, I will abide by Club rules and all applicable FAA rules and regulations.

In consideration of my desire to fly, my membership in and anticipated flight(s) with the Club, I intend to be and know that I am hereby legally bound by this agreement that the tow pilot, winch operator, instructor and/or the Finger Lakes Soaring Club shall not be liable for my death, personal injury or any loss to my property caused in any manner, whether attributable to the negligence of the tow pilot, winch operator, line person, instructor and/or the Club for any reason occurring during the time of my membership.

- 1) I waive any right of action against the tow pilot, winch operator, line person, instructor and/or Finger Lakes Soaring Club for any and all causes.
- 2) On behalf of myself, my heirs, successors and assigns I further covenant not to sue or participate in any action against the tow pilot, instructor and/or the Club on any such cause or claim.
- 3) I am aware that there are risks associated with flying and with my proximity to propeller driven aircraft and Winches and I agree to assume all these risks.
- 4) I have shown good and valid proof of self insurance for all causes, whether bodily harm or personal property injury, and agree to hold harmless and indemnify the club and its members from all liability resulting from my participation in membership.
- 5) I understand that in case of an accident I will be personally responsible for the deductible of club provided insurance.

Applicant	Date	Witness	Date
Credentials Verified (Operations Manager or Board Me	Date mber)	Checkout Recd. (CFIG)	 Date

- 1. Fees are listed on the club fee schedule.
- 2. We accept cash or personal checks [payable to Finger Lakes Soaring Club] to cover the membership fee.
- 3. Submit fee and application to the Operations Manager on the field.