



Balloon Flight Passenger Waiver Form

I understand that my transportation in any hot air balloon operated by Ballooning Canterbury.com, or my participating in any event that Ballooning Canterbury.com is flying in, is as a flight passenger.

I understand that the pilot in command has the final responsibility for the safe operation of the aircraft and I agree to obey his commands. If I have any questions regarding my role, the flight, the balloon or any event, I should ask my pilot.

I understand that a flight in a hot air balloon and related operations may entail a variety of serious risks, including arrest for trespass or for other violations, bodily injury, death, loss of or damage to personal property and financial loss, including loss of, or exclusion from, insurance cover. By signing this form I acknowledge that I absolve Ballooning Canterbury.com and its representatives of responsibility for any liability, financial or otherwise, which might arise whether or not by negligence, from any direct or indirect loss, injury or death which might be sustained by me from participation in this flight. I assume all such risks myself and will not be able to recover any amount from the persons and organisations I indemnify in this release.

I understand that it is my responsibility to inform the pilot of any existing medical conditions that I may have. I have listed these below:

Conditions of Flight

- Passengers must not manipulate any balloon controls except with the express permission and instruction of the pilot;
- Passengers must obey pilot instructions at all times;
- Passengers must declare all medical conditions;
- Passengers must wear suitable clothing. Enclosed footwear must be worn (no open-toed sandals or shoes);
- No smoking is permitted indoors, around the balloon, or on-board the balloon;
- Small cameras (with suitable restraining strap) are allowed, no other carry-on luggage of any kind is permitted;
- Matches, lighters, and sharp objects must not be carried;
- Dropping of objects from the balloon is strictly prohibited.

Medical Declaration

Please indicate whether any of the following conditions apply:

	Yes	No
Donated blood in the last 24 hours	<input type="checkbox"/>	<input type="checkbox"/>
Pregnant	<input type="checkbox"/>	<input type="checkbox"/>
Low blood pressure	<input type="checkbox"/>	<input type="checkbox"/>
High blood pressure	<input type="checkbox"/>	<input type="checkbox"/>
Untreated chest pain	<input type="checkbox"/>	<input type="checkbox"/>
Have had a cold, the flu, or other illness within the last 7 days	<input type="checkbox"/>	<input type="checkbox"/>
Surgery in the last 12 months	<input type="checkbox"/>	<input type="checkbox"/>
Other:		

I agree to abide by the rules of Ballooning Canterbury.com, my pilot's commands, and New Zealand's Civil Aviation regulations and I sign this form in order to confirm my agreement and to be assigned as a flight passenger.

Passenger Name: _____

Signature: _____

Date: _____