



## **Day of Mission: Flight Authorization, Liability Release and Indemnity Form**

**Pilot Note:** Please Fax both pages of this completed document before departure OR mail OR place in your car to send after flight. **DO NOT DEPART WITH THIS DOCUMENT IN YOUR POSSESSION.** Thank You.

**Patient or Supporting Passenger Note:** You must complete the appropriate blanks and sign this Agreement if you will be a passenger (patient or support) on a LifeLine Pilots flight. The same holds true if you are a parent, guardian or other legally authorized person consenting to a flight for a minor (as a patient or passenger, hereinafter referred to as "Minor") **or** an adult patient unable to provide his/her own consent (hereinafter referred to as an "Other Individual".) By signing this Agreement, you agree that in exchange for this free air transportation, you, the Minor, and/or Other Individual, if applicable, are giving up any rights to recover damages in the event of your and/or the Minor's/Other Individual's death, injury, property loss or any other loss arising from an accident, incident, cancellation or delay in connection with any such flights.

I, \_\_\_\_\_, and I, \_\_\_\_\_ (for second adult passenger), on behalf of myself and/or the following Minor(s)/Other Individual(s) unable to provide their own consent, \_\_\_\_\_, acknowledge that:

1. Lifeline, Inc. dba LifeLine Pilots, and other assisting Volunteer Pilot Organizations, facilitate access to free air transportation through FAA-certified volunteer Pilots who have offered their assistance to fly me and/or the referenced Minor/Other Individual;
2. By signing this Release Agreement, I understand that the services donated on my behalf, in the form of time, services, aircraft, and flight expenses being furnished by the Pilot, Co-Pilot, LifeLine Pilots) constitute personalized air transportation of significant value and material personal benefit being in exchange for this release. I regard such transportation as a significant material factor in my well-being and physical prosperity and, if applicable, that of the Minor/Other Individual that is the patient for whom the flight is being conducted or is a supporting passenger for such patient and for whom I am consenting;
3. The following volunteer Pilot(s), Co-Pilot(s), and aircraft owner(s) \_\_\_\_\_ and \_\_\_\_\_ (or their substitutes, should one or more substitute Pilots or aircraft become necessary in order to complete a flight), who are not being financially reimbursed for their services or the expenses of this undertaking, have agreed to provide the Pilot services and aircraft for air transportation, free of charge, at the request of and for the assistance and convenience of the persons identified above;
4. LifeLine Pilots and its volunteer Pilot(s) and aircraft owner(s), relying on this Release, may provide air transportation and may (but are under no obligation to) provide ground transportation to assist passenger(s) to obtain and/or return from prescribed medical treatment/evaluation or other medically related purposes, to travel to: \_\_\_\_\_ on(date): \_\_\_\_\_;
5. Lifeline, Inc. dba LifeLine Pilots is a non-commercial, non-profit volunteer organization which will not be paid for its services in arranging the air transportation described above. Further, the volunteer nature of the organization precludes any guarantee of accomplishment of the objective of the flight;
6. These flights are flown by the Pilot alone. No crew assistance is provided. Passengers are personally responsible for entering and exiting the aircraft without assistance from the Pilot. The patient is responsible for providing a support person for assistance, and advance arrangements must be made with LifeLine Pilots. The Pilot may be unable to provide assistance to passengers in exiting the aircraft in the event of an emergency.

**In consideration for receiving any such aircraft and Pilot services, provided free of charge, I personally, and on behalf of the Minor/Other Individual, agree with respect to each such flight:**

1. While in or about the aircraft, to assume all risk of damage or injury, including death, however caused, as well as the risk that the flight may not be accomplished, even if these results are caused by the negligence of LifeLine Pilots, the Pilot(s) or aircraft owner(s), or other circumstances;
2. That neither I, the Minor/Other Individual, or any of my/their heirs, representatives or assigns will make any claim against or sue LifeLine Pilots, the Pilot(s) and aircraft owner(s) as a result of any personal injury, wrongful death, property damage or other loss or damage occurring in connection with the intended transportation, irrespective of cause, even if caused by error or negligence of LifeLine Pilots, the Pilot(s) or the aircraft owners(s), and I/they hereby release LifeLine, Inc. dba LifeLine Pilots, the Pilot(s) and the aircraft owners(s) from any such claims or suits;

3. To protect and hold harmless, undertake the defense of, and fully indemnify Lifeline, Inc. dba LifeLine Pilots; its members, directors, officers, employees and volunteers; the Pilot(s); aircraft owner(s); and their heirs, assigns, and successors in interest from all loss, liability, damages, fees, costs, and expenses of defense of any suit brought by any party relating to the intended transportation, including cancellation or delay of flight or failure to provide return flight, even based on error or negligence of LifeLine Pilots, the Pilot(s), or aircraft owner(s).

I, on behalf of myself and the Minors/Other Individual(s), if applicable, do hereby grant permission to LifeLine Pilots to use my/our name and visual image in any marketing publications which might appear in the various media, or in connection with public relations activities of LifeLine Pilots.

I hereby confirm that I have carefully read and understand this agreement, that it is a Release of potential claims of liability for the negligence of LifeLine Pilots, the Pilot(s), aircraft owner(s), or other volunteers by me on behalf of myself and any Minor/Other Individual unable to provide his/her own consent) for whom I am responsible, and that I am signing it of my own free will. All parties agree that this Release and Indemnification shall be governed by the laws of the State of Illinois.

**IMPORTANT NOTE: Anyone on the flight who is also consenting for a Minor/Other Individual, will need to sign in two (2) places, as the parent and as legal Guardian (sole/shared), or other capacity.**

**Adult Passenger (18 years or older) on behalf of myself:**

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Emergency Contact Phone: (\_\_\_\_) \_\_\_\_\_

**Second Adult Passenger, (18 years or older) on behalf of myself (if applicable):**

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Emergency Contact Phone: (\_\_\_\_) \_\_\_\_\_

**Parent, Legal Guardian or other Person Authorized to Sign for Minor/Other Individual(s) below (Proof of guardianship may be required):**

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Nature of Relationship: Parent\_\_\_\_; Sole Guardianship\_\_\_\_; Shared Guardianship\_\_\_\_, with \_\_\_\_\_

Other (explain) \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Emergency Contact Phone: (\_\_\_\_) \_\_\_\_\_

**Minor (less than 18 years old/Other Individual) or other individual unable to give consent:**

Print Name: \_\_\_\_\_ Emergency Contact: \_\_\_\_\_

Address: \_\_\_\_\_ Emergency Contact Phone: (\_\_\_\_) \_\_\_\_\_

**Minor (less than 18 years old/Other Individual) or other individual unable to give consent:**

Print Name: \_\_\_\_\_ Emergency Contact: \_\_\_\_\_

Address: \_\_\_\_\_ Emergency Contact Phone: (\_\_\_\_) \_\_\_\_\_