



**Soaring Society of Dayton Inc. dba Caesar Creek Soaring Club of Ohio (CCSC)**

**CAUTION: SIGNING THIS FORM REDUCES OR ELIMINATES SOME OR ALL OF YOUR LEGAL RIGHTS  
IF THE APPLICANT IS UNDER 18, PARENT OR GUARDIAN MUST SIGN.**

**MEMBERSHIP and TRANSIENT AIRCRAFT WAIVER**

In consideration of being permitted to utilize the real property, facilities, equipment and/or aircraft of the Soaring Society of Dayton, Inc. (SSD) dba Caesar Creek Soaring Club of Ohio (CCSC), and for other valuable consideration, the undersigned, for himself/herself, and the undersigned's heirs, administrators, insurers, subrogees, successors and assigns hereby releases CCSC and SSD and their respective members, employees, agents, volunteers, insurers, successors and assigns from any and all past, present and future actions, causes of action, claims, damages, costs, liabilities, expenses, compensation, third-party actions, suits at law or in equity, including claims or suits for contribution and/or indemnity of whatever nature, whether sounding in contract, tort (including, but not limited to, claims of negligence) or strict liability, whether known or unknown, or accrued or unaccrued, based on, arising from or pertaining to the undersigned's use of the real property, facilities, equipment and/or aircraft referenced above.

This release is executed by the undersigned based on his/her understanding that participation in gliding and soaring activities, both in the air and on the ground, are or may be hazardous and may result in an accident, injury or death, and the undersigned voluntarily agrees to accept such risks, hazards and results as evidenced by the undersigned's signature below.

I am a member of the Soaring Society of America (SSA). SSA Membership No. \_\_\_\_\_

**PARENT/GUARDIAN CONFIRMATION AND CONSENT** (for Applicants under age 18)

I hereby confirm that I have read, consent to and approve the foregoing application by my son/daughter/ward.

I CERTIFY THAT I HAVE READ AND UNDERSTOOD THE WHOLE OF THIS DOCUMENT. IN SIGNING BELOW, I ACKNOWLEDGE THAT I AM WAIVING ANY CLAIMS THAT I MIGHT HAVE BY VIRTUE OF THE NEGLIGENCE OR OTHER FAULT OF ANY OF THE RELEASED PARTIES LISTED ABOVE, INCLUDING CLAIMS ON MY OWN BEHALF, IN MY CAPACITY AS A PARENT, LEGAL REPRESENTATIVE AND HEIR OF MY WARD, AND CLAIMS ON BEHALF OF MY WARD IN HIS OWN CAPACITY. I UNDERSTAND THAT I AM RESPONSIBLE FOR AND AM ASSUMING ALL FINANCIAL RESPONSIBILITY RESULTING FROM THIS MEMBERSHIP AND/OR WAIVER.

SIGNED this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

**Applicant's Signature**

**Parent/Guardian's Signature**

**Witness's Signature**

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**Print Name**

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