

RISK WARNING AND RESPONSIBILITY WAIVER

Please, read this document carefully and fill the blanks before signing it.

Full name: _____
ID number: _____ Date of birth: _____ Gender: M / F
Address: _____ N°: _____
City: _____ Zip code: _____
E-mail: _____

FLYING CONSTRAINTS. The flyer confirms that:

1. Doesn't exceed 120 Kg (264 pounds).
2. Is older than 5 years old.
3. Is not pregnant.
4. Has never had any shoulder, neck or back injury in the past.
5. Is not under any drugs or alcohol effects.
6. Has never had any heart problems in the past.
7. Does not suffer epilepsy, or any other severe mental or physical disability.
8. If affected by any of the abovementioned constraints, has been previously authorized by the suitable medical authorities to perform the indoor skydiving activity and has duly informed Madrid Fly's staff while checking in.

By signing this document, the flyer accepts:

1. Not being authorized to fly if not fulfilling all of the abovementioned conditions, understanding it is done on behalf of his own security and that of other flyers.
2. There is a very limited but unavoidable risk associated with the nature of the activity of freefalling and that there will be a vertical airflow of over 140 km/h in the flying chamber.

3. That Madrid Fly is making all the best efforts and applying state of the art technology to all security procedures, so there will be no complaints or suits against the company for personal injuries or death if motivated by:
 - a. the flyer's reckless behavior or lack of respect of the security procedures;
 - b. a third party not linked to Madrid Fly's staff and services.
 - c. events that might happen that could not be possibly anticipated by Madrid Fly or its suppliers even after having taken all the necessary steps and security measures, unless forced by its staff negligence, when otherwise could have been avoided.
4. To follow all the instructions given by Madrid Fly's staff.
5. To allow Madrid Fly to record video tapes and take pictures of the flyer in order to use them for exhibitions, advertising, marketing campaigns and merchandising without limitation.
6. According to the 15/1999 Law of December 13th of data Protection, you give your consent for the treatment of your personal data given by you. It will be incorporated to the Personal Data List of Madrid Fly S.L, registered in the Spanish Agency of data protection. Your Data will be used by administration and commercial management.
7. You have the right to access, modify and cancel subscription, as established in the law by the communication, attaching a copy of your I.D/ Passport in the direction below: Madrid Fly, S.L – Avda. Ntra. Sra. Del Retamar nº16 – Las Rozas de Madrid (Madrid).
8. If the flyer decides not to enter the flying chamber, or to abandon it before having completed the full flying experience, the flying slot shall be considered used and the flight time will not be neither changed nor reimbursed.
9. If any part of this document is considered non-enforceable or invalid, it shall not affect other parts of it and they shall continue fully in force.
 - a. I have fully read and understood the full extension of this document and I agree with all its terms and conditions.
 - b. I declare all the aforementioned information provided is correct.

Date: _____ Signature: _____

When flyers are children under legal age, one of the parents or legal tutors must sign aside.