



INTRODUCTORY HELICOPTER EXPERIENCE PROGRAM APPLICATION
16 & 17 January 2019

Personal Details:

Name:			
Address:			
Phone:	Business:	After hours:	Mobile:
Email:			
Date of Birth:		Weight:	T-Shirt Size:
Comments/ Additional Information:	<hr/> <hr/> <hr/> <hr/> <hr/>		

Emergency Contact Details:

Name:		Relationship:	
Address:			
Phone:	Business:	After hours:	Mobile:
Email:			

Photo Release: I hereby give permission to be photographed during the **Introductory Helicopter Experience Program**. I understand the photos will be used to keep a record of activities and may also be used for promotional activities including brochures and social media.

I hereby apply to enrol in the Airwork Helicopters **Introductory Helicopter Experience Program**. I certify that I will be 15 years of age or older as of the 16th January 2019 and that I am physically fit and have no medical conditions that would prevent me from participating in this program.

I understand that if I cancel 50% of the program fee of \$530 is not refundable after I have been accepted into this program unless my place can be filled by another participant. If Airwork Helicopters cancels the full fee is refundable.

I understand that if during the program there are inclement weather conditions or other safety hazards the flying elements of the program may need be rescheduled to another time. If this occurs Airwork Helicopters will do its best to provide a mutually suitable time.

Signature: _____ Date: _____

Parent or Guardian Signature (if applicant is less than 18 years of age): _____

Printed Name of Parent or Guardian: _____



Payment Details – Full payment must accompany this application.

Airwork Helicopters Introductory Helicopter Experience Program 16 & 17 January 2019

TOTAL AMOUNT \$530.00

- VISA
- MASTERCARD

CARD NO.

CVV

EXPIRY DATE /

NAME ON CARD _____

SIGNATURE _____

Or contact Airwork Helicopters for other payment options