



Application

22. Int. Kaiserwinkl-alpinballooning 18. - 25.01. 2025

PILOT:		Date of birth	
Adress:		Nr. Pilot license	
Postal code:		PIC-hours	
phone:		Fax:	
mobile Pilot:			
mobile Crew:			
e-mail:			
CLUB:			
BALLON:		Registration:	
Type:		size:	
Name:		color:	

Phone number is important for the meetings Whatsapp group

CREW:	Adress:
1.	
2.	
3.	
4.	
Insurance:	High:
Participation Nightglow:	Transportation of VIP-Guest yes
Balloon: basket: no:	Commercial Pilot & take Passengers yes

I hereby confirm my participation and waive claims, in particular claims for damages that may arise out of my participation against the organizer or commissioned third parties. I agree to indemnify the organizer of third party claims which may have been caused by any negligence by me. The pilot decides independently on rearmament drive and recovery of the balloon

Date:

Signature: