

Introductory Flight Form

I agree to purchase an Introductory Flight at Tampa Bay Soaring Society, 40223 Sunpath Ave. Zephyrhills, FL. I also agree to abide by all club regulations and hold harmless Tampa Bay Soaring Society and all representatives for any damages that may ensue.

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Date: _____ Signature: _____

For participants under 18 years of age, the parent or adult guardian must sign below:

Guardian: (print) _____ Signature: _____

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