

Airplane _____
Date _____
Paid via _____
Sign Release _____



2244 AIRPORT WAY, REDMOND, OR 97756
Tel 541-923-2244 Fax 541-923-2255

Visitor Survey

Please print clearly

Name _____ Date _____
Business _____
Address _____
City _____
State _____ Zip _____ Country _____
Phone _____ Email _____

Marketing Survey

What type of airplane do you currently own/rent? _____

Which aviation magazines do you subscribe to? _____

Which Lancair kit plane are you most interested in?

Legacy Legacy Fixed Gear ES/ES-2D/ES-P IV/IV-P IV-P Propjet

Are you considering other kit planes? _____

I would like to order my Lancair Kit Plane:

Today 6 Months 1 Year Just Shopping at this time

I would like to purchase an:

Information/Video Packet Video Only Literature Only

Thank you for visiting Lancair International and taking the time to fill out this questionnaire.

SHARED COST ORIENTATION FLIGHT & WAIVER/LIABILITY RELEASE

I desire to be carried as a passenger in the LANCAIR Legacy, Legacy Fixed Gear, ES, IV/IV-P, IV-P Propjet or Sentry aircraft. I hereby acknowledge and confirm that I have knowingly and voluntarily assumed all risks in connection with riding in a LANCAIR aircraft. Further, I do hereby, for myself, my heirs, personal representatives, assigns, and all other persons claiming under or through me, remise, waive, release, forever discharge, covenant not to sue and agree to indemnify and hold harmless all releases of and from all liability, loss, claims, demands, judgments, and expenses in connection therewith, that may accrue by reason of any loss, damage, or injury to me, or to my property, or by reason of my death, in any way arising in connection with or relating to my riding in the LANCAIR aircraft, regardless of the manner in which such loss, damage, injury, or death is caused, including acts or negligence of any of the releases (unless such acts or negligence constitute recklessness or willful misconduct.)

I further acknowledge and confirm that I am aware and fully understand that the LANCAIR aircraft in which I am to be carried as a passenger is an experimental aircraft. I have carefully read and I am voluntarily signing this agreement.

Print Full Name

Sign Here

Print Full Name

Sign Here

Print Full Name of Minor

Sign Here (Parent or Guardian)

Print Full Name of Minor

Sign Here (Parent or Guardian)

Received \$150.00 Legacy FG, \$250.00 Legacy, ES, IV/IVP and \$350.00 Propjet. A nonrefundable shared cost demo ride on any LANCAIR KIT PLANE, which is credited back to you once you place a deposit on a kit.

Credit Card _____ Expiration _____

By _____ Date _____

Pilot's Name and Signature _____ / _____

NOTE:

The original signed release must be retained on the ground by an authorized LANCAIR representative.