



**AVIATION SUMMER CAMP
WAIVER AND MEDIA RELEASE FORM**

June 8 - 12, 2026

Participant Name (Print): _____

Address: _____

City / State / Zip: _____

Phone: _____

Email: _____

Waiver and Release of Liability

I elect to attend the event for Lewis University Aviation Summer Camp scheduled on June 8 - 12, 2026. I, the undersigned, assigns, executors, and administrators, hereby agree to indemnify, keep and hold harmless Lewis University, its agents, officials, volunteers, and employees from any and all claims, damages, causes of action, losses, suits, liabilities, judgments, costs, and expenses (including reasonable attorney's fees and expenses) and liability imposed by law, which I may have or which may hereafter accrue to me against Lewis University or its administration, whether or not due to the negligence or omission of the University, arising out of or connected with participation in the Aviation Summer Camp.

I further agree to follow and be bound by the rules and regulations outlined in the Lewis University Handbook and all applicable local, state, and federal laws.

Photo and Media Authorization

I grant permission to Lewis University to photograph, record, or otherwise capture my image, voice, and likeness during participation in the Aviation Summer Camp. I authorize Lewis University to use these materials in publications, promotional materials, websites, social media, and other media formats for educational, promotional, and institutional purposes without compensation.

I understand that these images or recordings may be used in materials distributed by Lewis University and may be used in future promotional or educational materials.

Permission for Flight Activities

I understand that participation in the Soaring Futures: Aviation Exploration Camp may include optional introductory flight experiences in a Lewis University aircraft and/or flight simulation activities under the supervision of qualified aviation professionals.

I acknowledge that aviation activities involve inherent risks, including but not limited to aircraft operations, weather conditions, mechanical factors, and other unforeseen circumstances.

By signing below, I grant permission for the student listed in this registration form to participate in introductory flight activities and aviation training experiences as part of the camp program.

I understand that:

- Participation in flight activities is voluntary.
- All flights will be conducted by qualified pilots and aviation staff following applicable Federal Aviation Administration (FAA) regulations.
- Flights are weather permitting and subject to aircraft availability.
- Lewis University reserves the right to cancel or modify flight activities for safety reasons.

I further acknowledge that the student's weight is required for aircraft safety and planning purposes and agree to provide accurate information.

If I do not wish for the student to participate in flight activities, I will indicate that below.

Flight Activity Permission

Yes, I give permission for the student to participate in introductory flight activities.

No, I do not give permission for the student to participate in flight activities.

Refund Policy

All sales are **final**.

No refunds will be issued after registration has been completed.

Participant _____ Date: _____
Signature: _____

Parent/Guardian _____ Date: _____
(if under 18): _____

Please email the completed form to Kaitlyn Weber at kweber1@lewisu.edu