

IFFR Orange: FLY-IN 20th, 21st, 22nd April 2018

IFFR (Australia) Inc. ABN 33 430 947 696

GROUP LEADER/CONTACT (see indemnity for list of group members)

Name _____

Address _____

Phone _____ Fax _____ Mobile _____ E-mail _____

TRAVEL DETAILS

Travel by AIRCRAFT type _____ Registration _____ Car (hire / own) _____ OTHER _____

Arrival Date _____ Time _____ Departure Date _____ Time _____

<u>ACTIVITIES CHARGES</u> :	No. of persons	\$ per person	TOTAL Payable
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Total for Weekend _____ \$250.00 per person

NOTE: WE CAN NO LONGER ACCEPT PAYMENT BY CREDIT CARDS.

- Electronic Transfer to: IFFR (Aust) Inc. Suncorp Bank BSB: 484799 Acc. No: 03779-5513
Important: Please Identify your Deposit by Name or Membership Number.
- Cheque made payable to: IFFR (Aust) Inc and please send to the Treasurer.

PLEASE NOTE: FOR ACCOMMODATION PLEASE contact Central Caleula
ACCOMMODATION BOOKINGS ARE THE SOLE RESPONSIBILITY OF THE MEMBERS.

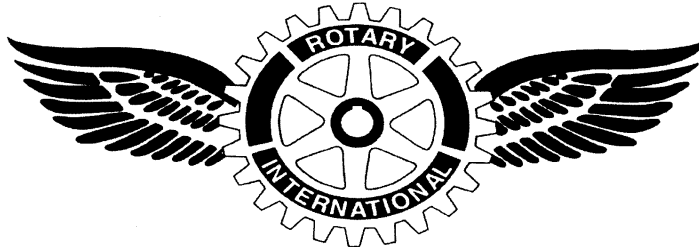
Please send this completed form together with the completed indemnity by 6th April 2018

To the Treasurer: Laurie Chapman, PO Box 963, ORANGE. NSW. 2800 .

Enquiries: Mal Hunter 07 3264 3104 0418 811 320

Email. mhun2323@bigpond.net.au

Disclaimer - "The International Fellowship of Flying Rotarians is a group dedicated to promoting aviation as an opportunity for fellowship and service. This fellowship operates in accordance with Rotary International policy, but is not an agency of, or controlled by, Rotary International."



INTERNATIONAL FELLOWSHIP of FLYING ROTARIANS

IFFR (Australia) Inc ABN 33 430 947 696

Registration and Indemnity Form
IFFR Orange: FLY-IN 20th, 21st, 22nd April 2018

INDEMNITY

We the undersigned, do hereby indemnify Rotary International, the International Fellowship of Flying Rotarians, I.F.F.R. (Australia) Incorporated, the various Rotary Clubs, the various Rotary Districts in Australia, and their members, pilots, officers, and agents thereof, associated with arranging functions and/or associated activities, from all liability of any kind arising out of any function or activity, arranged by or on behalf of any such person and body, and including any travel to or from the function or activity, whether organised as part of the function or activity or not.

Group Leader/Captain

Name _____ Signature _____

Group Members

1 Name _____ Signature _____

2 Name _____ Signature _____

3 Name _____ Signature _____

4 Name _____ Signature _____

5 Name _____ Signature _____

6 Name _____ Signature _____

DATED this _____ day of _____ 2018

NOTE: This indemnity is required to be signed by ALL participants attending any function or activity prior to attendance.

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(Please Copy this form as required)