

PASSENGER RIDE FORM

GREAT FALLS BALLOON FESTIVAL



FESTIVAL USE ONLY

PAID Cash Check #

Credit Card: VISA MC Other

COST

Rides purchased before the Monday prior to festival weekend: \$200/PERSON
 Rides purchased Monday–Thursday of festival week and throughout festival weekend: \$225/PERSON

CANCELLATIONS

All rides sold are scheduled during festival weekend. All flights are weather-dependent and rides are not guaranteed. In the event that a flight is cancelled, the original purchase price will be refunded.

TICKET DELIVERY

Ride tickets will be mailed out during the month of July. Ride tickets must be given to the pilot prior to your ride.

LAUNCH FIELDS

Balloons are launched from our Main Field at Simard-Payne and a remote launch field. The field you will be launching from will be indicated when you receive your ticket, and reconfirmed the day of the flight by your pilot.

PASSENGER INFORMATION

PASSENGER NAME

MAILING ADDRESS CITY STATE ZIP

PHONE ALTERNATE PHONE EMAIL ADDRESS

PREFERRED FLIGHT BODY WEIGHT (Required by our pilots)

FRI. AM FRI. PM SAT. AM SAT. PM SUN. AM SUN. PM

PAYMENT

Check (payable to Great Falls Balloon Festival)

Credit Card: VISA MasterCard Other

Send me a Invoice via email to pay securely online

ACCOUNT NUMBER EXP. DATE

NAME ON CARD PHONE CVV/SECURITY CODE

BILLING ADDRESS CITY STATE ZIP

STATEMENT OF PASSENGER RESPONSIBILITY

- I acknowledge and understand that my participation in a (hot air/gas) balloon flight is a potentially hazardous activity and that during my participation in a (hot air/gas) balloon flight conducted by a pilot, I will be exposed to risks.
- I understand that although the pilot has taken precautions to provide equipment and safety preparations for each flight, it is impossible for a pilot to provide absolute safety.
- I understand that I share the responsibility for safety in flight and I assume that responsibility.
- I have accepted responsibility to verify with my physician that I have no physical or psychological conditions that would prohibit me from participation in a (hot air/gas) balloon flight and I agree to comply with the instructions and directions of the pilot during the flight.

PASSENGER SIGNATURE DATE

MAIL COMPLETED FORM & PAYMENT TO

Great Falls Balloon Festival
 ATTN: Rides PO Box 1238
 Auburn, ME 04211

QUESTIONS

Email: rides@greatfallsballoonfestival.org