

# Aircraft Builder's Cooperative

## Builder/ Pilot Volunteer Work Agreement

Thank you for agreeing to volunteer with the Aircraft Builder's Cooperative (hereby referred to as "ABC".) Please read and sign this volunteer agreement, provide your contact information below, and review and sign the standard Hold Harmless agreement on the reverse.

As an ABC's Builder/ Pilot volunteer, I agree to:

- \* Make a one-time registration payment of \$500, \$250 of which is refundable when I receive my Sports Pilot's License.
- \* Commit to meeting approximately once per week, for three hours, for a period of about four months in the ABC's ground school study group/ crew in preparation for the FAA Knowledge Exam.
- \* Contribute approximately 100 additional hours of volunteerism over a three to four month period, helping the crew assemble a Kitfox S7 SS Light Sport Aircraft.
- \* Cooperate with my Certified Flight Instructor while in flight training (three to four months).
- \* Maintain confidentiality about ABC business discussions and decisions.
- \* Contribute to a supportive, collegial environment for my crew and all ABC members.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/ Guardian Signature (If under 18) \_\_\_\_\_

## Personal/ Contact Information

Name \_\_\_\_\_

Email \_\_\_\_\_  
*Your contact information will only be used for ABC communications, and never shared or sold.*

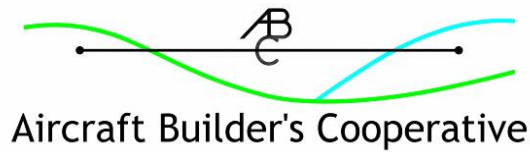
Address \_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_  
*Cell Home Work*

Emergency Contact \_\_\_\_\_  
*Name Phone # Relationship*

Health Insurance \_\_\_\_\_  
*Provider Account # Physician/ Admin Phone #*

Relevant Health info: \_\_\_\_\_  
*Allergies, Injuries, etc.*



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### Hold Harmless Agreement

I, \_\_\_\_\_ agree to perform the volunteer duties (referred to as "Activity") to which I am assigned to the best of my ability and in a professional manner. I understand that as an ABC volunteer, there may be certain risks related to the Activity. I hereby state and affirm that:

1. In consideration of being allowed to take part in this Activity, I agree to release and hold harmless ABC; and its members, officers, employees and agents; from all liability from any harm or injury that I may incur as a result of participating in the Activity, excluding proven gross negligence by ABC.
2. I authorize the ABC leadership to assist in obtaining appropriate emergency medical treatment for me in the event of an accident, injury or illness.
3. I hereby release and forever hold harmless ABC; and its members, officers, employees and agents; from any claims whatsoever which may arise on account of any first aid, treatment or service rendered in connection with participation in the Activity.
4. I understand that sport flying and mechanical work both carry certain inherent risks, hazards and dangers that can cause or lead to injury or death. I understand that while ABC makes every attempt to ensure a safe learning environment, it cannot eliminate any of these risks.
5. I understand that ABC does not carry medical insurance for volunteers, and I attest to having appropriate medical insurance to protect me in the event of an accident, injury or illness.
6. I understand that, in order to fly, I must maintain Pilot Liability Insurance.
7. Unless I indicate otherwise in writing, I agree that photographs, videotapes, or audiotapes may be taken of me during the course of the Activity for use by ABC for publicity purposes.
8. I understand that my volunteer association with ABC is at-will and can be terminated by either party at any time.
9. The terms of this Agreement shall be binding on my heirs, agents, executor, administrator and all members of my family.

*Signature* \_\_\_\_\_

*Date* \_\_\_\_\_

*Parent/ Guardian Signature* \_\_\_\_\_  
(If under 18)