THE MURRAY BRIDGE GLIDING CLUB INC

PO BOX 1509 VICTOR HARBOR SA 5211
WEBSITE: WWW.MURRAYBRIDGEGC.COM

I . .....

Of .....

Post Code ..... Phone .....

a solo glider pilot with the Murray Bridge Gliding Club inc. (M. B. G. C. inc) in consideration of the club allowing me to use it's aircraft hereby agree to reimburse the M. B. G. C. inc. for monies expended to cover the cost of excess under insurance policies in regard to damage or injury caused to or by the aircraft (solely owned by M. B. G. C. inc.) due to my negligent handling or control of the aircraft unless the instructor panel of the M. B. G. C. inc. determines that the said damage or injury was beyond my control.

I will not be held responsible for the total claim in respect of lapsed policies.

I understand that policies may change from time to time and that it is my responsibility to keep abreast of the current policies in force and their excess values providing that the M. B. G. C. inc. makes available a copy of the current policies in a prominent and accessible place.

I agree to pay to M. B. G. C. inc. the value of the excess within one calendar month of the accident or incident which caused the claim on the insurance.

Signed . ..... *Witness.* .....

Date . .....