

INVOICE: Florida Trike Flight

You have purchased the following instructional flight package, which is subject to your agreement to abide by all payment terms and policies.

Name of Flyer:		Email:			
Flyer's Address:					
Height: Weight:	Age: Florid	a Tel. Numbe	er:		
Flight Experience, if any: _					
Date Choice & Time (AM/PM):			_ Flight Profile:		
Purchaser Name if differer	nt from flyer:				
Billing Address, if differen	t from above:				
Program PurchasedIntroductory FligAdvanced IntroductoryOptional DVD orCustom Flight F	duction (approx two hour f Aerial Program	ir time) s air time)	•	225 125 75	
TOTAL NON-REFUNDABL	E AMOUNT NOW DUE:		\$		
I have enclosed a check, pa	yable to Incredible Adventu	ires, Inc.			
I authorize the charge of \$	to my VISA	DISCOVER	MASTERCARD	AMEX	as follows:
Card #		Exp			
By signing below, you autho I understand the activities in understand it is solely my re wish to assume the risks inv be signed before being permonfirmed flight date but can of God beyond our control. I time IA will attempt to resche and cannot reschedule the preceive a refund, less a procession up as scheduled, no reseven days in advance of so	this program are inherently sponsibility to judge if I am olved. I understand a Releasifted to fly. I understand Into not guarantee schedules dunderstand I will be notified adule the program at a muturogram within 48 hours of the sing fee of \$25. I undersefund will be granted. Requ	risky and ma healthy enoug ase of Liability credible Adver ue to matters d as soon as p ually agreeabl the scheduled tand that if I co	y involve the risk of the take part in the provided by Incrementures, Inc. will make such as maintenations and the take of the	of seriou his adver edible Ad ake ever nce, wea ent of a ce event I d I may e the fligh I must be	nture and whether I liventures, Inc. must by effort to meet my ather, winds, or acts cancellation at which A cancels the flight elect to request and at package or fail to be made at least
Signature:			Date:		