



HOLD HARMLESS BY PATIENT

I take note that my journey will be subject to the general conditions of carriage/tariffs of the carrier concerned and that the carrier does not assume any special liability exceeding those conditions/tariffs.

I am prepared at my own risk to bear any consequences which carriage by air may have for my state of health and I release the carrier, its employees, servants and agents from any liability for such consequences.

Date the..... Day of.....2007

Patients Name.....Signature

Witness Name.....Signature

Occupation.....