GENERAL CONDITIONS

Skydiving even practiced under strictly safety conditions, is a potentially dangerous activity that can result in injury or death. Each individual participant, regardless of experience has final responsibility for his own safety and for all the possible damages he could cause to himself or to another's during the practice of this activity. Exempting of any responsibility to all the members technicians and directors of Jump Aviation, SL, Club de Paracaidismo Castellón and the Aeroclub de Castellón, as well as the instructors, pilots and owners of any aircraft or aerodrome were the activity is held. By means of the present act the down signer, joins the Club de Paracaidismo Castellón and the Aero club de Castellon as a user member.

Although to practice Skydiving special health conditions are not required, the Student declares not have been scuba diving during the last 24 hours before the jump, as well as to be in a good health conditions, understanding like so not to suffer the following diseases:

- Any cardiovascular disease, of any kind, as much of chronic character as temporary (Circulation problems, of sanguineous pressure, cardiac dysfunctions, anemia....)
- Respiratory Diseases (bronchitis, asthma......)
- · Diseases of liver, kidneys, suprarenal are disorders of thyroid, glands or other glands or diabetes.
- Psychic diseases that can tolerate violent situations or loss of the knowledge (epilepsy, claustrophobia)
- Bony problems (spine, artrosis, osteoporosis......)
- Problems of ear

Signatures:

· Addictions to drugs or the alcohol

Skydiving can be safely practiced even suffering some of those diseases or addictions, as long as it is notified previously and a medical authorization has been shown.

ALCOHOL AND DRUGS CONSUMPTION IS NOT ALLOWED WITHIN A MINIMUM OF EIGHT HOURS BEFORE THE JUMP

In case of course abandonment we will return back to the costumer a partial economic quantity concerning Jump Aviation, SL establish tables.

In case to be needed to repeat some levels during the course, they are not included in the course price and will have to be paid before to do the next level

Student declares to have read and to accept the rules that are necessary to practice skydiving, and to be informed about the risks and freely to assume them.

ORGANIC LAW ON THE PROTECTION OF PERSONAL DATA CLAUSE STUDENT ENROLLMENT MINOR

In accordance with the provisions of Law 15/1999 on Protection of Personal Data, we inform you the details of your son / daughter collected from this form will be included in a file under the responsibility of JUMP AVIATION SL, in order to meet the commitments under the relationship we have with you and your son / daughter.

You can exercise your rights of access, cancellation, rectification and opposition by writing to: AV. MOLINS DE REI, 18 08755, CASTELLBISBAL (BARCELONA).

Until you tell us otherwise, we understand that your data and your son / daughter have not been modified and agree to notify any change, we have your consent to use for the purpose of imparting training in which you have registered your child / and comply obligations of our organization, including management of your file and related accreditation with the course taught.

Also and in accordance with the provisions of Law 34/2002, of July 11, Services Information Society and Electronic Commerce, in its Article 21, also request your explicit consent to send advertising our products or promotions that we feel may be of interest, by email or by any other means of electronic communication.

by any other means of electronic communication.
□ I have read and I'm agree to receive advertising or promotional information from JUMP AVIATION SL □ I have read and I'm not agree to receive advertising or promotional information from JUMP AVIATION SL
We inform you that at any time may revoke their consent to receive commercial communications by sending an e-mail to the email address info@skytime.info.
Finally, in accordance with the provisions of Law 1/1982 of May 5, on the right to honor, personal and family privacy and image, and provided not you notify us otherwise, we request us your consent to take pictures of your son / daughter during the performance of contracted activities with our organization in order to display them on our corporate website
$\ \square$ I do not want to we use the images of my son / daughter to the above mentioned treatments.
After signing this form you expressly authorize the processing of personal data, for the purpose specified by JUMP AVIATION SL.
Name and surname of student: DNI or Passport no:
Name and surname of Legal Guardian: DNI or Passport n°:

Castellón, at _____of ___

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Castellón, of of 201_	
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Mr/Mss	, with ID number, or
Passport number	·
WE AUTHORIZE:	
To our under-aged child	, to
take the Accelerated Free Fall Course with the co	mpany lump Aviation (SKYTIMF).
having read, understood and signed the General	
5 ,	, ,
Signed:	
Name and Surename:	
Traine and Sarchame.	
Signed:	
Name and Surename:	