



## Parent/Guardian Minor Consent

I/We are the parent(s) or legal guardian(s) of:

\_\_\_\_\_, DOB \_\_\_\_\_ (the "Minor")  
First Middle Last.

I/We support BFC in helping the Minor safely achieve his/her aviation goals. I/we understand that the Minor's participation in aviation involves both rewards of personal development and achievement as well as risks of personal injury, including death, but have determined that the rewards to the Minor exceed the risks.

I/we understand and agree: (1) that the Minor's participation in aviation activities is voluntary; (2) that Federal Aviation Regulations and Bakersfield Flying Club Rules are written to enhance aviation safety; and (3) that safe achievement of the Minor's aviation goals depends on his/her compliance with those Rules and Regulations.

I/We hereby authorize the Minor's participation in BFC's full range of aviation activities and flight training by a BFC-approved Certified Flight Instructor. I/We understand that the Minor's participation in such activities will be terminated in the event the Minor jeopardizes aviation safety by failing to follow Federal Aviation Regulations, Bakersfield Flying Club Rules, or directions of the Minor's Certified Flight Instructor.

In an emergency I/we grant BFC and the Minor's Certified Flight Instructor authority to provide required emergency medical treatment and understand that in an emergency, efforts will be made to contact me/us.

Dated: \_\_\_\_\_, 2024

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Telephone