

INDEMNITY BOND FOR CARRIAGE OF SPECIAL NEEDS GUEST AND ACCOMPANYING GUEST

GUEST NAME:			
PERMANENT ADDRESS:			
TELEPHONE NO:			
I, undersigned			son/wife/daughter
of, resident of			
Hereby agree and undertake, at all times t employees, directors and agents from and death, damage or loss that may occur and Flybig, its employees, directors or agents r	l against all liabilit from any damage	y arising out of any es, payments, expe	bodily injury and/or nses, fees and cost which
<name guest="" of="">on its flight Noincluding without limitation, from any dela cancellation and/or diversion of the flight If the flight is rerouted on my account, the This bond shall be governed and construed.</name>	ay in the schedule due to any reasor e entire handling o	ed departure or arr n whatsoever. cost will be borne b	ival time of the flight,
Signature of Special Needs Guest/Accomp	panyingGuest:		
Date:			
Address:			
Talanhone No:			

Note: In the event of flight cancellation/ indefinite delay/ disruption, Flybig Airlines will do all possible to accommodate the Guest on the next available Flybig flight subject to availability. The Form of Indemnity should be available in triplicate.