



**Full Flight Training Facility
Sightseeing Tours**

5296 Bell School Line, Burlington, Ont
L7M 0P1

Tel: 905-336-4010 Fax: 905-336-6676
info@spectrumairways.com

TRANSIENT AIRCRAFT REGISTER

DATE: _____

REGISTRATION: _____

TYPE: _____

Name of Pilot: _____ Owner of Aircraft: _____

Home Address: _____ Local Address: _____

Telephone Number: _____

Telephone Number: _____

Intended Date of Departure: _____

Number of Nights: _____ @ \$17.55 per night = \$ _____ (plus G.S.T.)

I, the undersigned, fully understand that the charges being applied are for the parking space only and hereby release Spectrum Airways Ltd. And Kovachik Aircraft Services Limited from all liability for any damage to the aircraft, however caused, while the aircraft is in the care, custody or control of 514744 Ontario Ltd. o/a Spectrum Airways or Kovachik Aircraft Services Limited.

Signature: _____

*****PLEASE ENSURE THAT YOU PAY FOR ANY AVGAS OR OIL THAT YOU TAKE AT THE TIME OF PURCHASE. UNFORTUNATELY, WE CANNOT EXTEND CREDIT UNTIL YOUR DEPARTURE FOR THESE SERVICES. THANK YOU.**