

FORM 1

PASSENGER NO LIABILITY FORM

Office: _____

I hereby accept that [Insert Organisation Name] is NOT liable in any way for financial compensation to me for any DAMAGE or LOSS to my person or my property (or that of my organization) as a result of using [Insert Organisation Name] station or facilities

Name : _____

Signature : _____

Date of Signature : _____

Date of Travel : _____

Details of Vehicle / Journey : _____

Details of Items being carried (If applicable) _____

SPECIMEN