## TO: SAINT LUCIA AIR AND SEA PORTS AUTHORITY MANOEL STREET, CASTRIES, ST. LUCIA

## **INDEMNITY FORM-C**

IN CONSIDERATION of the Saint Lucia Air and Sea Ports Authority permitting

(**OPERATOR**).....to operate private flights at the George F.L. Charles Airport

NOW (OPERATOR).....

of (ADDRESS).....agrees with you that:

(OPERATOR).....

SHALL INDEMNIFY AND HOLD HARMLESS AND KEEP INDEMNIFIED EACH OF THE SAINT LUCIA AIR AND SEA PORTS AUTHORITY, ITS OFFICERS, EMPLOYEES AND AGENTS AND THE GOVERNMENT OF SAINT LUCIA, ITS OFFICERS, EMPLOYEES AND AGENTS AGAINST AND FROM ALL DEMANDS, CLAIMS, LIABILITIES, LOSSES, DAMAGES, PENALTIES, FINES AND EXPENSES WHATSOEVER (INCLUDING LEGAL FEES AND EXPENSES) THAT MAY BE INCURRED BY YOU OR THEM IN ANY WAY ARISING OUT OR

CONNECTED WITH **(OPERATOR'S)**.....USE OF OR OPERATION AT THE GEORGE F. L. CHARLES AIRPORT.

(OPERATOR)..... SHALL PAY AND REIMBURSE SUCH AS MENTIONED ABOVE ON DEMAND.

Dated: .....

(OPERATOR).....

Per.....(Name) (Title)

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Signature