

Waiver of Liability and Release Jeeps Forge Blacksmith/Tinsmith/Woodwork

PLEASE READ THE FOLLOWING CAREFULLY.

Printed Name: _____ **Age:** _____ **Date:** _____

Inconsideration of being permitted to participate in a blacksmithing/wood working /wood carving class, I am in full recognition and appreciation of the dangers and risks inherent in such activities, do hereby waive, release and forever discharge JAMES M. SABO, JEEP'S FORGE AND OTHER INSTRUCTORS and family from and against any and all claims, demands, action or causes of action for costs, expenses or damages to personal property or personal injury, which may result from my participation in these activities.

I understand and admit that my participation in blacksmithing/ wood working/wood carving is voluntary. I assume full responsibility for any injuries or damages resulting from my participation in this activity including responsibility for using reasonable judgment in all phases of participation of the activity. I recognize and understand that the activities may be hazardous, that my participation is solely at my own risk, and that I or my parent or guardian shown below assume full responsibility for any resulting injuries and damages.

All blacksmithing /wood working/wood carving classes will begin with a safety lesson followed by a lesson on the proper use of the tools and equipment in and around the shop and I agree to abide by all instruction given.

Come prepared!

- Wear short or long sleeve shirt, long pants and closed-toe heavy shoes/boots which will protect you from the possibility of a flying embers or sparks.

YOU WILL NOT PARTICIPATE If not dressed ***appropriately!***

Safety goggles, ear plugs, aprons, gloves and hand sanitizer will also be provided.

Also, Due to the pandemic the wearing of a mask will be optional to cover the mouth and nose. If NOT feeling well, contact us and do not attend.

If you have any questions, have them answered before signing this document.

I acknowledge that I have read and understand this entire Waiver of Liability and Release, and I agree to be legally bound by it.

Participant's Signature: _____ Phone Number: _____

Witnessed By (PRINTED): _____ Date: _____

Witness Signature: _____

If Participant is under 18 Years of Age , a parent or guardian must also sign this form.

****If Participant is under the age of 16 a parent/guardian must accompany and stay/take the class each day.***

Signature of Parent or Guardian: _____ Date: _____

Printed Name: _____ Phone No.: _____

Updated 9/21/2021