



## Safety Release & Waiver of Responsibility

**BLACKSMITHING IS AN INHERENTLY DANGEROUS ACTIVITY AND, AS SUCH, STOROWTON VILLAGE MUSEUM (SVM), A DEPARTMENT OF THE EASTERN STATES EXPOSITION (ESE), REQUIRES ALL PERSONS ATTENDING STOROWTON VILLAGE MUSEUM BLACKSMITHING CLASSES OR WORKSHOPS OR USING ANY SVM/ESE EQUIPMENT OR FACILITIES TO SIGN THIS RELEASE AND WAIVER OF RESPONSIBILITY.**

I understand that blacksmithing is an inherently dangerous activity and acknowledge that there are risks inherent in its practice, including without limitation:

- (1) the use of and exposure to hot coals, hot metal, and hot flux
- (2) the use of and exposure to sharp objects
- (3) the use of and exposure to power tools and hand tools
- (4) exposure to falling or flying objects
- (5) exposure to dirt, wax, oil, and grime

I understand that my negligence or failure to act within my abilities may contribute to or result in an injury. Eastern States Exposition/ Storowton Village Museum ("ESE/SVM") hereby specifically disclaims any and all responsibility or liability for, and I hereby irrevocably release ESE/SVM from, any and all claims, whether known or unknown, which I may have relating to: (i) any and all damages to the student or any personal property of the student, including without limitation, indirect and consequential damages or injuries as a direct or indirect result of the inherent risks of blacksmithing; (ii) any liability relating to instruction, construction, design, use of any ESE/SVM equipment or facilities, manufacture of any product, or any other activity undertaken in conjunction with classes or workshops offered by ESE/SVM or as a result of the use or application of information given or contained in any class or workshop offered by ESE/SVM or contained in any writing given to me by ESE/SVM or (iii) any actions taken by me while on the ESE/SVM premises with respect to construction, design, use of equipment or facilities or manufacture of any product.

I HEREBY REPRESENT AND WARRANT THAT I UNDERSTAND THAT BY SIGNING THIS DOCUMENT, I MAY BE WAIVING CERTAIN LEGAL RIGHTS. I UNDERSTAND THAT I WILL BE RESPONSIBLE FOR ALL ACTIONS TAKEN AT ESE/SVM FACILITIES, INCLUDING WITHOUT LIMITATION, USE OF EQUIPMENT AND FACILITIES. I UNDERSTAND THAT I AM SOLELY RESPONSIBLE FOR ANY AND ALL DAMAGES, WHETHER DIRECT OR CONSEQUENTIAL, FOR THE USE AND APPLICATION OF INFORMATION GIVEN AT ANY WORKSHOP OR CLASS OR CONTAINED IN ANY WRITING DISTRIBUTED BY ESE/SVM.

Student's Name (Printed Legibly): \_\_\_\_\_ Date: \_\_\_\_\_

For Students Under 18:

Parent/Guardian Name (Printed Legibly): \_\_\_\_\_

Parent/Guardian relation to the student \_\_\_\_\_ Cell Phone# \_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature (if under 18)

\_\_\_\_\_  
Date