



Waiver of Liability

I have been invited to attend, observe, and or participate in a firefighting training exercise, sponsored and administrated by Franklin Lamoille Fire School, in concert with various private and public organizations. Such exercises often present hazards to life and property of the participants, observers or attendees. In order for you to attend or observe any of the following activities you need to sign waver of liability.

1. I acknowledge the inherent dangers of such training and assume the risk to my person and property, both personal and that of others under my control and supervision.
2. I agree to waive all claims arising from my participation, observation or attendance so said training for damages to myself, my property or property of others under my control and supervision arising out of inaction or through any negligence other than deliberate and intentional tortuous action by Franklin Lamoille Fire School, its agents and employees in both their official and personal capacities.
3. Further, this Waiver of Liability and agreement extends to claims that benefit my heirs, assignees, administrators or executers, including not limited to, all claims arising from my wrongful death or injury.
4. Further, the protection of the Waiver of Liability and agreement extends to all cooperating organizations, corporations and individuals, their agents and employees, in both official and personal capacities, who are assisting Franklin Lamoille Fire School in presentation and conduct of this training.
5. Further, I certify that I am physically qualified and capable to participate in the courses that I have selected.
6. I agree that any pictures or videos that are taken of me while I'm at FLFS are property of FLFS to use in any FLFS related activity such as fundraising, brochures, etc....

Name: (please print) _____ Date Of Birth _____

Signature: _____ Phone Number _____
(Signature of applicant)

Dept: _____ Date: _____

Signed _____ Home Number _____
(Fire Chief)

Under 18, parent's signature: _____ Home Number _____