

**KNIGHTDALE FIRE DEPARTMENT
FIRE SAFETY ACADEMY**

PARTICIPANT'S NAME: _____ **DATE OF BIRTH:** ____/____/____
(PRINT)

HOME ADDRESS: _____ **ZIP** _____

HOME PHONE: _____ **CELL PHONE:** _____

E-MAIL _____

Waiver, Release of Liability and Indemnification Agreement

I, the undersigned, acknowledge, agree, and understand that:

1. There are certain risks and hazards involved in participating in Fire Department activities that may result in injury or death to me or other participants, including but not limited to those hazards associated with weather, ground/facility conditions, emergency services equipment or vehicles, and actions of or the failure to act of other participants.
2. The very nature of observing or participating in public safety activities, training and/or displays is inherently hazardous or risky, including, but not limited to the acts of sitting or standing in proximity to fires and accident sites, climbing, running, lifting, participating in drills, operating equipment, riding in public safety vehicles, and collisions with other participants or stationary objects, all of which can cause serious injury or death to me and to others.

Furthermore, I, the undersigned, agree that in consideration for the right to participate in the Fire Safety Academy:

3. I voluntarily elect to accept and assume all risks of injury incurred or suffered by me (a) while participating and/or enrolled in the Fire Safety Academy, and (b) while observing Fire Safety Academy activities and while on or upon the premises of any and all facilities owned or arranged for by the Town of Knightdale.
4. I release, discharge, and agree not to sue the Town of Knightdale, the property owner if other than the Town of Knightdale, or their owners, officers, agents, servants, associations, employees or any person or entity connected with the Fire Safety Academy or facility for any claim, damages, costs, or cause of action that I have or may have in the future as a result of injuries or damages sustained or incurred by me from whatever cause including but not limited to the negligence, breach of contract, or wrongful conduct of the parties hereby released.
5. Participant agrees to and does hereby hold the Town, its officers, council members, and employees harmless from any and all liability arising out of negligence, omission, defect, or other cause of action in any way associated with participation in the Fire Safety Academy; the he/she will defend the Town, its officers, council members, and employees, and pay all attorney fees in any and all actions brought as a result of such; and that he/she will indemnify the Town, its officers, council members, and employees against any and all loss sustained by reason of such negligence, omission, defect, or other cause of action arising out of participation.

SIGNATURE OF PARTICIPANT _____ **DATE:** _____

Health Insurance Company: _____

MAIL OR DELIVER REGISTRATION TO:

**KNIGHTDALE FIRE DEPARTMENT
950 STEEPLE SQUARE COURT
KNIGHTDALE, NC 27545**

FOR FURTHER INFORMATION, PLEASE CALL the Knightdale Fire Department at (919) 217-2270
or email Tim.Guffey@knightdalenc.gov