

## **HCTC WAIVER AND INDEMNIFICATION FORM**

The City of Westfield, Indiana, (herein "City"), agrees to make available its or other selected Hamilton County Training Center ("HCTC") for \_\_\_\_\_ ("Participant's") use. In doing so, Participant agrees to the following terms and conditions:

1. Participant is familiar with the requirements of the activity he/she is participating in at HCTC, understands the risks associated with participation in this activity, and voluntarily and willingly assumes the risks associated.

2. Participant understands and accepts the City makes no representation of and assumes no liability for the suitability or condition of its or other selected HCTC facilities, training grounds, or equipment, or for the competency of its staff, or for the quality and content of its educational services.

3. Participant understands and agrees to indemnify and hold harmless the City, its elected officials, and employees, including instructors in their personal and representative capacities, for any claims, demands or suits of any nature, kind or description whatsoever, including, but not limited to claims for direct, indirect or consequential damages, acts of God, or any types of costs and expenses, for or on account of any loss or damage to property owned or possessed by any student or other invitee or any injury to any student or invitee which may result from any cause, including but not limited to, the condition and operation of City facilities, training grounds, and equipment, or the condition and operation of any other selected facilities, training grounds and equipment, and the acts or omissions of members of its staff or the acts or omissions of other students or invitees.

4. Participant authorizes the City to seek emergency medical assistance on his or her behalf, as necessary, and agrees to pay for any and all medical expenses incurred on his or her behalf. Participant shall indemnify and hold harmless the City for any and all such emergency medical expenses and for any claims related to the aid rendered to the student or invitee by the City or its staff during any such emergency situation.

5. By signing this document, Participant hereby voluntarily acknowledges that he/she understands and accepts the above terms as a condition of the Participant's participation in any City sponsored event, training, class, use of any City property or equipment or other circumstance as described in paragraph one of this waiver and that any such participation in the aforementioned activities may involve difficult, strenuous and dangerous physical activities to be undertaken by the Participant and that the Participant expressly assumes all of the risks associated with such activities. The Participant further expressly agrees not to bring a suit for damages against the City, its employees or any independent contractors based upon any of the Participant's liabilities they waived in this document. This document constitutes the complete agreement between the parties.

**HCTC WAIVER AND INDEMNIFICATION FORM**

This WAIVER AND INDEMNIFICATION shall take effect upon signing.

**HCTC WAIVER, RELEASE AND INDEMNITY**

I, \_\_\_\_\_, am at least 18 years of age and am of sound mind to sign this document on my own behalf. I am the designated Participant identified herein, and I desire to participate in Fishers Fire Department Mayors Youth Academy Session being held on \_\_\_\_\_, 202\_\_ at the Westfield HCTC. I acknowledge I have read and understand the information contained herein.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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**HCTC STUDENT WAIVER, RELEASE AND INDEMNITY**

I, \_\_\_\_\_, am a minor child, and am the designated Participant identified herein. I desire to participate in Fishers Fire Department Mayors Youth Academy Session being held on \_\_\_\_\_, 202\_\_ at the Westfield HCTC. I acknowledge I have read and understand the information contained herein.

\_\_\_\_\_  
Signature of minor child

\_\_\_\_\_  
Date

**HCTC PARENT WAIVER, RELEASE AND INDEMNITY**

I am the parent/guardian of the minor child identified herein (“the Participant”) who wishes to participate in the activity. I have read and understand the information contained herein. I am familiar with the requirements and the risks associated with the Participant’s participation in this activity and am willing to assume the risk associated. I consent to Participant participating in the described above activity and agree to, and agree to be bound by, the waiver, release, and indemnity provided herein.

\_\_\_\_\_  
Signature of parent/guardian

\_\_\_\_\_  
Date