



**Guardian Baltimore
Training Liability Waiver Form**

2227 Huntingdon Ave, Baltimore, MD 21212
Phone XXX - Email info@guardianbaltimore.org

I, _____, hereby enter into this agreement voluntarily for the purposes of participating in activities associated with Guardian Baltimore Training located at 2227 Huntingdon Ave. Baltimore, MD 21211.

To the best of my knowledge:

- I am in good physical condition and fully able to participate in all activities related to Guardian Baltimore Training.
- I am fully aware of the risks and hazards connected with participating in said activities, including physical injury, damage or destruction to my personal property or even death, and hereby elect to voluntarily participate.

Therefore, I hereby RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE, Guardian Training, their officers, agents, and employees (hereinafter referred to as RELEASEES) from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or to any property belonging to me, while on the premises.

It is my expressed intent that this release and hold harmless agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representative, if I am deceased, and shall be deemed as a RELEASE, WAIVE, DISCHARGE, and CONVENTION TO SUE the above named RELEASEES. I hereby further agree that this Waiver of Liability and Hold Harmless Agreement shall be constructed in accordance with the laws of the State of Maryland.

In signing this release, I acknowledge and represent that I HAVE READ THE FORGOING Waiver of Liability and Hold Harmless Agreement, UNDERSTAND IT AND SIGN IT VOLUNTARILY as my own free act and deed; no oral representations,

statements or inducements, apart from the foregoing written agreements have been made; and I EXECUTE THIS RELEASE FOR FULL, ADEQUATE AND COMPLETE CONSIDERATION FULLY INTENDING TO BE BOUND BY SAME.

Participant's Signature

Date

By signing below, I admit that I am a legal guardian for the above named minor. I have the capacity to cosign this document and ensure for the safety and well-being of said minor. Further, I hereby agree that I have read the above liability waiver and with full knowledge and consent agree to the waiver of any liability issues.

Guardian's Signature
(if Participant is a minor under the age of 18)

Date