## WAIVER, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

## PLEASE READ CAREFULLY

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To: Ed Storch and Storch Knives thereinafter referred to collectively as "SK" and employees, representatives, officers and agents [herein referred to collectively as "SK Employees"].	
I	hereby sign this agreement on behalf of myself, my personal
represe	ntatives, heirs and assigns:
1.	I agree as a precondition to my participation in a knife or knife related class or demonstration organized by SK or SK Employees, and in further consideration of SK allowing me to do so, to be strictly bound by the terms of this Waiver, Assumption of risks and indemnity Agreement [herein referred to as "this agreement"].
2.	I acknowledge that knife making activities involve INHERENT RISKS that may cause SERIOUS INJURY and POSSIBLY DEATH TO PARTICIPANTS I further recognize that using machinery of any kind and knife making activities involve ADDITIONAL RISKS AND DANGERS
3.	I fully understand the risks and dangers associated with my participation in this knife or knife related class or demonstration and ACCEPT SAME AT ENTIRELY MY OWN RISK.
4.	I hereby WAIVE ANY AND ALL CLAIMS which I may have against SK and SK Employees and RELEASE SK AND SK Employees from ALL LIABILITES for injury, death, property damage or any other loss sustained by me as a result of my participation in knife class or demonstration, DUE TO ANY CAUSE WHATSOEVER including, without limitation, negligence part of SK or SK Employees. I further AGREE TO INDEMNIFY SK and SK EMPLOYEES for any and all legal fees [on a solicitor and client basis] or costs which may be incurred in defending any lawsuit or claim I may bring against them.
5.	I appreciate This Agreement applies whether SK is at fault or not and it limits the liability of SK Employees to the same extent as it limits the liability of SK EVEN THOUGH SK Employees are not formal parties to this Agreement.
6.	I acknowledge that animals and farm areas pose a risk of serious injury and possible death to participants. I accept responsibility for all adults, children and pets in my party for all activities at SK (Storch Knives) events.
	READ AND UNDERSTAND THIS AGREEMENT. I UNDERSTAND THAT THIS DOCUMENT CONTAINS A SE NOT TO SUE SK OR SK EMPLOYEES AND GIVE INDEMNTY FOR ALL CLAIMS.
DATE: _	EMAIL:
ADDRES	SS:POSTAL CODE:
PHONE	EMERGENCY CONTACT:

Phone: 780-763-2214 EMAIL: storchknives@gmail.com

SIGNATURE\_\_\_\_\_\_ WITNESS: \_\_\_\_\_