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## HOLD HARMLESS WAIVER AND RELEASE OF LIABILITY

### Welding Activity Participation

**\*\*Participant Name:\*\*** \_\_\_\_\_

**\*\*Date:\*\*** \_\_\_\_\_

#### **\*\*1. Acknowledgment of Risks\*\***

I, the undersigned, understand that participating in welding activities involves inherent risks, including but not limited to burns, eye injuries (including arc flash), exposure to harmful fumes, electric shock, fire hazards, cuts, abrasions, and other physical injuries. I acknowledge that these risks may result in serious injury, permanent disability, or death, and I voluntarily choose to participate in the welding activity despite these risks.

#### **\*\*2. Assumption of Risk\*\***

I knowingly and freely assume all risks, both known and unknown, associated with participating in the welding activity, including risks arising from the negligence of Soldamos llc, its employees, agents, instructors, or other participants. I accept full responsibility for any injuries, damages, or losses that may occur as a result of my participation.

#### **\*\*3. Hold Harmless and Release of Liability\*\***

In consideration of being permitted to participate in the welding activity, I, for myself, my heirs, executors, administrators, and assigns, hereby release, waive, discharge, and agree to hold harmless Soldamos llc, its owners, employees, agents, volunteers, and affiliates (collectively, the "Released Parties") from any and all claims, demands, actions, or causes of action arising out of or related to any loss, damage, or injury, including death, that may be sustained by me or my property while participating in the welding activity, whether caused by the negligence of the Released Parties or otherwise.

**\*\*4. Health and Fitness\*\***

I certify that I am physically fit and have no medical conditions that would prevent me from safely participating in the welding activity. I agree to immediately notify the instructor or staff of any health concerns or changes in my condition that may affect my ability to participate safely.

**\*\*5. Compliance with Safety Rules\*\***

I agree to follow all safety instructions, rules, and guidelines provided by Soldamos llc and its staff during the welding activity. I understand that failure to comply may result in my removal from the activity without refund.

**\*\*6. Emergency Medical Treatment\*\***

In the event of an injury or medical emergency, I authorize Soldamos llc to secure medical treatment on my behalf, and I agree to bear all costs associated with such treatment.

**\*\*7. Governing Law\*\***

This agreement shall be governed by and construed in accordance with the laws of the state of [Insert State]. Any disputes arising under this agreement shall be resolved in the courts of [Insert County/State].

**\*\*8. Acknowledgment of Understanding\*\***

I have read this Hold Harmless Waiver and Release of Liability, fully understand its terms, and sign it freely and voluntarily without any inducement. I am aware that by signing this document, I am waiving certain legal rights, including the right to sue the Released Parties.

Signature and Date

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