



**SOUTHERN MAINE COMMUNITY COLLEGE
MAINE FIRE SERVICES INSTITUTE**

Assumption of Risks and Release of Liability

Name of Participant (printed) _____

Address _____

Home/Cell Phone # _____ Work Phone # _____

Emergency Contact Person _____

Emergency Contact Phone # _____

Name of Training Program _____

I understand that my participation in the above training/certification testing by Southern Maine Community College's ("SMCC") Maine Fire Service Institute ("MFSI") will involve the performance of various strenuous physical tasks, including raising and climbing a ladder to a second story roof, walking on a roof, lifting and rolling firehoses, and extinguishing live fire, and that I may be wearing full protective gear and an airpack while I perform these tasks. I understand I will be exposed to heat, smoke, chemicals, and environmental conditions, including adverse weather. I understand from my own inquiry the physical demands and inherent risks associated with such activities; and that such risks include serious injuries, impairment or death, caused by, but not limited to: physical exertion, falling and burns. I understand this training/certification testing, by its very nature, carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries and/or illness. I therefore declare that I am in excellent health and may participate safely in the event with no restrictions, and that I agree to assume all such risks related to participation in the training/certification testing.

The Maine Community College System ("MCCS"), SMCC, and MFSI makes no representations that, in allowing me to take part in this examination, I am fit to undertake it. I am aware that no health and/or accident insurance is provided for me by MCCS, SMCC, or MFSI. I know, understand, and appreciate the risks that are inherent in the above-listed activity. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

In consideration of my participation in the training/certification testing activities, I, for myself, spouse, heirs, personal representatives, estate or assigns, agree to release, discharge, indemnify and hold harmless MCCS, SMCC, and MFSI and their officers, employees, agents, and volunteers from and against any and all claims, demands, actions, causes of action, costs or damages including attorney fees, of any sort on account of damage to personal property, personal injury, or death which may result from my participation in the above-listed training/certification testing. This release includes claims based on the negligence of MCCS, SMCC, and MFSI, and their officers, employees, agents, and volunteers, but expressly does not include claims for which Maine law prohibits release, arising from my participation in the training/certification testing.



Assumption of Risks and Release of Liability

I understand that by agreeing to this clause I am releasing claims and giving up substantial rights, including my right to sue.

I further authorize attending medical personnel to administer any necessary medical attention that may be required as a result of my participation in this course.

Please sign below only if you read, understand and agree to all of the above terms and conditions.

Signature: _____ Date: _____

(Parent/Guardian signature required if student is 16 or 17. Participation is not allowed for students under age 16.)

Parent/Guardian Printed Name _____

Parent/Guardian Signature: _____ Date: _____