



ASSUMPTION OF RISK AND RELEASE OF CLAIMS

I wish to bring my child(ren) to HuntsvilleWest. I have read HuntsvilleWest's Code of Conduct and agree to comply with the established policies for *Coworking with Children*.

I understand that I am responsible for my child(ren)'s health and well-being, as well as those of others, at HuntsvilleWest. I will provide proper supervision and control of my child(ren) to ensure theirs and others' health and safety while on-site. I understand that I will be solely responsible for my child(ren) and their conduct.

I understand and acknowledge that exposing my child to the work environment presents the potential for death, serious injury, and property loss. The risks include but are not limited to those caused by terrain, facilities, equipment, weather, vehicular traffic, and the actions of others, including but not limited to coworkers, visitors, and pets. I appreciate the character of the risk involved and on behalf of my child I voluntarily assume all risk of possible harm or injury.

I hereby WAIVE, FULLY RELEASE, AND DISCHARGE from any and all liability, claims, demands, damages, costs, expenses, actions, and causes of action for the death, disability, or personal injury to my child(ren), as well as any property loss, HuntsvilleWest and West Huntsville, LLC, its Directors, employees, officers, owners, agents, members, successors, assigns and visitors. I also agree to INDEMNIFY, DEFEND, AND HOLD HARMLESS, the entities mentioned in this paragraph from any liabilities, loss (including reasonable attorney's fees) or claims made by other individuals or entities as a result of my child's visiting HuntsvilleWest.

THIS WAIVER, RELEASE AND DISCHARGE COVERS MY PERSONAL RIGHTS AND MY RIGHTS AS PARENT/GUARDIAN.

LIST OF CHILDREN PARTICIPATING

NAME	_____	RELATIONSHIP	_____
NAME	_____	RELATIONSHIP	_____

EMERGENCY CONTACT INFORMATION

NAME	_____	RELATIONSHIP	_____
EMAIL	_____	PHONE	_____

MEMBER SIGNATURE

_____	DATE	_____
MEMBER NAME (PRINT)	_____	