



Artisan's Asylum, Inc. Release of Claims, Indemnity, and Hold Harmless Agreement

January 2024

I, the entity or person identified on the signature page of this agreement ("Mentee" or "Licensee"), in consideration of the opportunity to participate at the Artisan's Asylum, Inc., and for other good and valuable consideration hereby acknowledged, do hereby agree to forever RELEASE Artisan's Asylum, Inc., its employees, agents, officers, and volunteers (the "Releasees") from any and all claims, actions, rights of action and causes of action, damages, costs, loss of services, expenses, compensation and attorney's fees that may have arisen in the past, or may arise in the future, directly or indirectly, from known and unknown personal injuries which I or my heirs, successors, or assigns may have as the result of my participation at the Artisan's Asylum, Inc. program, and all activities related thereto.

I further acknowledge that participation in this program is voluntary and may expose me or my property to risks resulting from the use of tools and equipment by myself and other volunteer participants. I therefore also promise to INDEMNIFY, REIMBURSE, DEFEND, and HOLD HARMLESS the Releasees against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, including claims for damages, costs and attorneys' fees, by me or my heirs, successors, or assigns arising from personal injuries to myself or property damage from my participation in the program.

I hereby further covenant myself, my heirs, successors, and assigns not to sue the said Releasees on account of any such claim, demand, or liability.

I am fully aware that by signing this document I am releasing the above-mentioned parties from liability that may arise as a result of intentional or negligent acts of these parties. Additionally, it is my intent to release the above-mentioned parties from liability relating to any accident and resulting injuries and/or death that may occur while participating in activities at the Artisan's Asylum, Inc.

Mentee Name

Mentee Signature

Date

Guardian Name

Guardian Signature

Date