



# NORTH WHATCOM FIRE AND RESCUE

*SEMPER PARATUS*

## North Whatcom Fire & Rescue AGREEMENT TO PARTICIPATE IN FIREFIGHTER TRAINING

I, \_\_\_\_\_, ("The Student") desire to participate in live fire firefighter training evolutions on \_\_\_\_\_, 20\_\_\_\_, offered by the instructors of \_\_\_\_\_ in conjunction with the firefighter training facilities owned by Whatcom County Fire Protection District No.4 and operated by North Whatcom Fire & Rescue.

1. I acknowledge that there are severe risks of injury to my safety, including the possibility of serious injury or death, involved in live fire training evolutions. I understand and appreciate these risks, and certify that I am in good physical condition and that I am not currently taking or under the influence of any medication or other substance that would affect or impair my ability to participate in live fire training evolutions. I am willing to accept the risks inherent in live fire training evolutions.

### RELEASE AND HOLDHARMLESS AGREEMENT

2. For and in consideration of the opportunity to (i) participate as a student in live fire training evolutions, (ii) participate in firefighter training, and (iii) to utilize the firefighter training facilities owned by the District, I agree to forever release, indemnify and hold harmless North Whatcom Fire & Rescue and Whatcom County Fire Protection District No.4 (the "District") and the instructors of \_\_\_\_\_, their respective agents, employees, officers and elected officials, from any and all claims, demands, damages, liabilities, suits, actions and causes of action of whatsoever kind related to or arising from my participation in all types of firefighter training provided by the instructors of \_\_\_\_\_, North Whatcom Fire & Rescue, and/or the District.

I represent and warrant that I have read and understood the terms of this Agreement and that I am voluntarily waiving my legal rights by signing this Agreement. I understand that this Agreement will remain in effect for all of the firefighter training that I receive from either the instructors of \_\_\_\_\_, North Whatcom Fire & Rescue or the District until I provide written notice to North Whatcom Fire & Rescue or the District that I am revoking my waiver.

I represent and warrant that I have had the opportunity to have this Agreement reviewed by an attorney of my choosing and that I either have consulted with an attorney or voluntarily choose not to consult with an attorney before signing this Agreement

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Printed Name

WITNESSED BY:

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Witness Printed Name