*Livingston Forge LLC*  
RELEASE OF LIABILITY

READ CAREFULLY – THIS AFFECTS YOUR LEGAL RIGHTS

In exchange for participation in the Blacksmithing activities organized by Daniel Dean and/or Livingston Forge LLC (hereinafter “COMPANY”) and its employees, representatives, or agents (hereinafter “STAFF”) of 2101 Ave. J, Lubbock, Texas, 79411 and/or use of the property, facilities, and services of the COMPANY, I agree for myself and (if applicable) for those under my guardianship (hereinafter “WARD”), to the following:

\_\_\_\_(int) I agree to observe and obey all rules, instructions, or warnings both posted and orally presented by the STAFF of the COMPANY and will don the appropriate personal protective equipment (PPE) appropriate for each activity as provided by the COMPANY, or personally supplied.

\_\_\_\_(int) I recognize that there are certain inherent risks associated with these activities and I assume full responsibility for loss of life, personal items, and personal injury to myself and (if applicable) those under my guardianship. In case of emergency the COMPANY will contact 911 and provide first aid as necessary to prevent loss of life or limb.

\_\_\_\_(int) I agree to indemnify and defend the COMPANY and the STAFF against all claims, causes of action, damages, judgement, cost, or expenses, including attorney fees and other litigation costs, which may in any way arise from my or my WARD’s use of or presence upon the facilities of COMPANY.

\_\_\_\_(int) I agree to pay for all damages to the facilities of COMPANY caused by any negligent, reckless, or willful actions by myself or my WARD.

\_\_\_\_(int) I agree and acknowledge that I am under no pressure or duress to sign this Agreement and that I have been given a reasonable opportunity to review it before signing.

I HAVE READ THIS DOCUMENT AND UNDERSTAND ITS CONTENTS. I FURTHER UNDERSTAND THAT BY SIGNING THIS RELEASE, I VOLUNTARILY SURRENDER CERTAIN LEGAL RIGHTS.

Printed Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant(s) Under 18 years of age (“WARD”)

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature