

West Warwick Public Library Innovation Lab
Assumption of Risk, Waiver of Liability and Hold Harmless Agreement

In consideration of allowing the child of which I am parent or guardian (hereinafter “the child”) to participate in the Innovation Lab at the West Warwick Public Library, including the use any tools, equipment and supplies therein, including but not limited to pottery wheels, wood-burning equipment, engraving tools, pottery clay (hereinafter referred to as the “Innovation Lab Activities”), I herein acknowledge and understand that there are inherent dangers and risks associated with the Innovation Lab Activities and that the child may incur personal injuries, including, but not limited to, dizziness, fainting, falls, cardiac and respiratory injuries, exposure to silica dust and particles, which may result in serious bodily injury and/or death. I herein acknowledge that I am fully responsible for any personal injuries that the child may incur during participation in the Innovation Lab Activities.

I further acknowledge and understand that it is exclusively my responsibility to seek from my own physician a medical evaluation and clearance before the child’s participation in the Innovation Lab Activities. I hereby agree to assume all risks, liabilities and responsibilities of all accidents, damages, injuries, including death, which the child may incur arising from the Innovation Lab Activities.

I herein acknowledge that the child will follow and abide by the Innovation Lab Policy and Procedures.

I also herein acknowledge and understand that I will be responsible for any damages or costs caused by the child to the equipment or tools that the child uses while engaged in the Innovation Lab Activities.

I, for myself, my heirs, executors and administrators do hereby release, waive, and discharge the West Warwick Public Library and the Town of West Warwick, their officers, agents, employees, and insurers from and against any and all claims, demands, or causes of action arising from any claims of personal injuries or death the child may incur arising from the Innovation Lab Activities.

I hereby acknowledge that I have read and understand the terms of this Assumption of Risk, Waiver of Liability and Hold Harmless Agreement and that the child’s participation in the Innovation Lab Activities is purely voluntary.

Guardian Library Card #

Child Name

Guardian Print Name

Child Library Card #

Guardian Signature

Date