

# Release and Indemnity Agreement

## For a Student (Under Age 18) Touring EDGE's Facilities



This is a release and indemnity agreement to be signed by a parent or guardian of a person under age 18 (Student) who is going to tour facilities of **EDGE OUTREACH, Inc.** (EDGE), a Kentucky non-profit corporation with offices at 1500 Arlington Avenue, Louisville, KY 40206, phone 502-568-6342.

EDGE maintains offices and warehouse space to hold the equipment and tools used for its various ministries, including providing pure water and repairing hand pumps in developing countries. Nothing contained in EDGE's facilities is inherently dangerous, but there are tools and inventory that could possibly cause harm if mishandled or moved. EDGE will take reasonable care to ensure Student's safety while on its premises and when participating in EDGE-sponsored activities. But this agreement is to protect EDGE against any legal claims that might arise as a result of Student's presence at EDGE's facilities or participation in EDGE-sponsored activities.

*Do not sign this form unless you intend to release EDGE from liability.*

Student's name (please print clearly) \_\_\_\_\_ Age \_\_\_\_\_

Student's school \_\_\_\_\_

Approximate date of visit to EDGE \_\_\_\_\_, 20 \_\_\_\_\_

### RELEASE AND INDEMNITY

By signing and dating this form, I agree that —

- I am Student's parent or legal guardian.
- I have read this form and I understand it.
- Student will tour EDGE's facilities at 1500 Arlington Avenue, Louisville, Kentucky, supervised by at least one adult in addition to a teacher. The tour may include a demonstration of water purification and pump repair techniques. Student will not be exposed to any toxic chemicals, electrical machinery or other inherently dangerous items.
- On my own behalf and on behalf of Student and his or her heirs, executors, administrators, successors and assigns —
  - I release and agree to hold EDGE and its directors, officers, employees and agents harmless from any liability, claims or demands for personal injury, sickness or death, as well as any property damage or expenses that Student may incur or that may occur while Student is at EDGE's facilities or participating in the activities described above.
  - I will hold harmless and indemnify EDGE and its directors, officers, employees and agents for any liability Student may sustain while at EDGE or while participating in the activities described above, including related expenses.
- I assume full responsibility for the cost of any medical care that Student may need as a result of sickness or injury that Student may incur while at EDGE or while participating in the activities described above.

Name (please print clearly) \_\_\_\_\_

Relationship to Student  Parent  Legal guardian

Signature \_\_\_\_\_ Date \_\_\_\_\_, 20 \_\_\_\_\_