

**ACKNOWLEDGEMENT AND ASSUMPTION OF RISK
AND WAIVER OF LIABILITY**

ACKNOWLEDGEMENT OF AND ASSUMPTION OF RISK: I acknowledge that my participation (and/or the participation of my minor child or children **age 10 & up only**) in the behind-the-scenes Batten Conservation Laboratory tour program within the USS *Monitor* Center at The Mariners' Museum involves certain risks that may pose a threat to the safety of tour participants. Participants may be exposed to hot and cold temperatures and high humidity (Wet Lab is not climate-controlled). The conservation lab is also a loud, industrial environment that contains large volumes of alkaline solutions in open tanks and other controlled chemicals. I acknowledge that these risks include the possibility of serious personal injury or death. I further acknowledge that there is a risk that personal property may be lost or damaged. I hereby assume all of the risk of participating in this activity and take responsibility for all such risk and any injury or damage that I (and/or my minor child or children) may suffer by participating in this activity. I acknowledge that, despite the aforementioned risks, I will increase my personal safety during the tour by adhering to all lab tour rules and instructions.

WAIVER OF LIABILITY: In consideration for my (and/or my minor child or children's) participation in this activity, to the full extent that the law allows, I hereby, on behalf of myself, (and/or my minor child or children), my heirs, estate, and personal representatives, release, waive, discharge, and agree to hold harmless The Mariners' Museum and its Board of Trustees, employees, agents, servants, and volunteers from any loss, cost or expense such as reasonable attorney's fees and all liability, including without limitation, liability for personal injury, damages to property, or wrongful death, on account of or in any way resulting from my participation in this activity.

This Agreement is intended to be as broad and inclusive as is permitted by law. However, if any provision or part of this Agreement is held to be invalid or otherwise not legally enforceable for any reason, the remainder of this Agreement shall not be affected thereby and shall remain in full force and effect.

I HAVE READ THIS ACKNOWLEDGEMENT AND ASSUMPTION OF RISK AND WAIVER OF LIABILITY IN ITS ENTIRETY AND I FREELY AND VOLUNTARILY EXECUTE THE SAME. I UNDERSTAND THAT I MAY BE WAIVING CERTAIN LEGAL RIGHTS BY EXECUTING THIS DOCUMENT.

_____ (SIGNATURE)

Print Name: _____

Date: _____

Name & Ages of Minor Children (**age 10 & up only**):

Name: _____ Age: _____

Name: _____ Age: _____

Please write additional names on back of sheet (if necessary)

Address: _____

City: _____ State _____ ZIP _____

Phone: _____

Phone: (W) _____ EMAIL _____