

**HANDMADE NORTH CAROLINA BASKETS, INC
LIABILITY WAIVER**

ALL attendees are required to fill out this form prior to attending HNCRB Workshop classes. Each attendee must sign, date, and return this waiver form in order to participate in HNCRB Workshops and classes.

Please initial each:

_____ RELEASE/WAIVER: I hereby agree to indemnify and hold harmless HANDMADE NORTH CAROLINA BASKETS, INC (known as HNCRB), its employees, Joni-Dee Ross and David C. Ross from and against any and all claims for personal injuries or damages of any kind arising from participation in HNCRB Workshops and classes.

_____ PHOTO CONSENT: By your signature, you agree that HANDMADE NORTH CAROLINA BASKETS, INC may use the below named attendee's photograph in the routine promotion of its classes and activities and other non-commercial applications.

_____ CONTROL AGREEMENT: I hereby agree that I will hold only myself responsible for any alcohol consumed in workshops or class and that I will practice good judgment if I choose to consume alcohol. I also agree that the instructor can stop my consumption of alcohol and may call a cab at my own expense if he or she feels that I have had too much to drink.

I fully understand and acknowledge that the activities at HANDMADE NORTH CAROLINA BASKETS, INC involve inherent risks, dangers and hazards which may result in injury or illness. Please note: There are staircases with dual handrails at HNCRB. I also agree not to enter the WORKSHOP unless approved by and accompanied by Joni-Dee Ross or David C. Ross.

I hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify Joni-Dee Ross and David C. Ross, HANDMADE NORTH CAROLINA BASKETS, INC, its officers, managers, members and employees from any and all claims, actions or losses for bodily injury, property damage, wrongful death, or otherwise that I may have, either in my own which may arise from my participation in classes or events or use of equipment at HANDMADE NORTH CAROLINA BASKETS, INC.

All must Sign: Even if you choose not to consume alcohol.

Please agree to these terms by signing your signature below.

Signature: _____

Printed signature: _____

Date: _____