

**RELEASE FROM LIABILITY  
HFD TRAINING GROUNDS  
STUDENT ACTIVITY WAIVER FOR  
THE CITY OF HUTCHINSON FIRE DEPARTMENT**

(PRINT, EXCEPT WHERE INDICATED)

STUDENTS NAME \_\_\_\_\_

AGE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE \_\_\_\_\_

The above person will be allowed to perform live training on (date) \_\_\_\_\_

**RELEASE FROM LIABILITY (ADULT)**

I, \_\_\_\_\_, of \_\_\_\_\_  
(Name of person signing release) (Address)

at my request, am being granted the right to participate in live hands-on activities on grounds utilized by both HCC and the Hutchinson Fire Department, do hereby agree to waive any claims for personal injury, death, or property damage/loss against the City of Hutchinson and against all members of the City of Hutchinson Fire Department.

\_\_\_\_\_  
(Signature of Student)

\_\_\_\_\_  
(Signature of Witness)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Date)