

**RELEASE, ASSUMPTION AND ACCEPTANCE OF RISK, WAIVER AND
HOLD HARMLESS AGREEMENT**

In consideration of my entry and participation at the Annual Youth Day, held August 30-31, 2024 at the Suffolk County Training Center (hereinafter the "Youth Day Event") offered by the Firefighters Association of the State of New York, I hereby acknowledge and represent as follows:

1. I understand that my participation in some or all of the fire service activities and evolutions, including additional skills that will be taught may result in injury or damage, which I may receive in the form of personal injuries, death and/or property damage.

2. I am familiar with the goals and purposes, dangers, risks, requirements, rules, practices, systems and objects of the events in which I am participating and have received information concerning these events and have had an opportunity to investigate and observe them.

3. I represent that I am in good physical condition and physically fit and able to participate in these events and that I will not participate while under the influence of drugs or alcohol. I further represent that I obtained the consent of the authority having jurisdiction or other sponsoring entity or agency (i.e. Learning for Life, Fire Department, Fire District, Town, Village) over my home emergency services entity to participate in the Youth Day Event, and that such entity has valid insurance coverage in effect at the time of my participation in the Youth Day Event that insures me against injuries, losses, or damages that I may cause or sustain as a result of my participation in the Youth Day Event.

4. To the fullest extent permitted by law, I hereby assume full responsibility for any injury or damage, including injury, death or property damage, which may occur to me or to others while participating in, or being involved in, the Youth Day Event, including, but not limited to, any claims for personal injury, death or property damage resulting from or arising out of my acts and participation in the Youth Day Event.

5. To the fullest extent permitted by law, I hereby waive any and all claims that I, my heirs, successors, representatives and/or assigns may have by reason of injury, death or property damage sustained by me in my participation in the Youth Day event, and do hereby release and discharge the Firemen's Association of the State of New York, Suffolk County, the Vocational Education Extension Board of the County of Suffolk, and all event hosts and course instructors, as well as the officers, agents, representatives, servants or employees thereof, from any claims for injury or damage against them, or any of them, which I have or may have by reason of my entry and participation in said Youth Day Event.

6. To the fullest extent permitted by law, I hereby hold harmless the Firemen's Association of the State of New York, Suffolk County, the Vocational Education Extension Board of the County of Suffolk, and all event hosts and course instructors against all loss, liability, costs, damages, acts or injuries to persons or property occurring as a result of my acts in the Youth Day Event described herein.

7. I consent to the publication and use of my name and likeness for the purpose of promotion, publicity, advertising, or other manner or media by FASNY and any other representative authorized to act on behalf of FASNY. Likeness includes, but is not limited to, photographs, sound and/or video recordings, films, broadcasts, brochures, publications, reports, web pages, promotional materials or any other audio-visual, electronic, printed, tangible work in any media or format, and/or reproductions of any of these. To the fullest extent permitted by law, I hereby release and hold harmless FASNY and its employees, agents, affiliates, sponsors, or other representatives from any and all claims, demands, or causes of action arising out of the use of my name and/or likeness.

8. I understand that despite all safety measures put in place for this training, some or all of the fire service activities and evolutions (including, but not limited to, live fire extinguisher operations, ventilation procedures and practice, hydrant operations/water supply, emergency bailout procedures, gross decontamination procedures, etc.), including additional skills that will be taught, are physical activities, and therefore may pose a risk of personal injury or damage, in the form of personal injuries, property damage, etc.

9. I understand that my participation in any and all of the fire service activities and evolutions (including, but not limited to, live fire extinguisher operations, ventilation procedures and practice, hydrant operations/water supply, emergency bailout procedures, gross decontamination procedures, etc.) offered is entirely voluntary, and I may decline to participate or decline to continue participation at any time, entirely at my discretion (and/or at the discretion of a parent or guardian, if I am under the age of 18).

10. I understand that my participation in some or all of the fire service activities and evolutions offered is not advisable if I currently have any injury or medical condition for which participation would be contraindicated. I hereby represent that I am medically and physically fit to participate in any and all of the fire service activities and evolutions in which I voluntarily participate. I further represent that I have consulted my medical care provider(s), if necessary, to confirm my fitness for participation.

I have read this Release, Assumption and Acceptance of Risk, Waiver and Hold Harmless Agreement and fully understand its terms and sign it after having read and reviewed it, with my signature being freely and voluntarily given.

Participant's Signature (over 18 years of age)

Date

Print Name

PARENTAL CONSENT FORM FOR PARTICIPANTS UNDER THE AGE OF 18

My son or daughter, namely: _____
has my permission to participate in the Youth Day Event described herein, and I hereby agree and consent to his/her participation. To the fullest extent permitted by law, I further agree to all provisions of the RELEASE, ASSUMPTION AND ACCEPTANCE OF RISK, WAIVER AND HOLD HARMLESS AGREEMENT set forth herein on behalf of myself and my son or daughter identified above.

NAME OF ADULT/PARENT OR GUARDIAN

DATE

SIGNATURE OF ADULT/PARENT OR GUARDIAN

DATE

ADDRESS, CITY, STATE AND ZIP CODE

ATTENTION:

Suffolk County Fire Academy Requirement

The Fire Department is required to submit an **Insurance Acord 25 Form** listing the following entity as an additional:

Suffolk County
Suffolk County VEEB
103 East Avenue
Yaphank, NY 11980

Please send the Acord 25 form and any questions to:
Natalie DeMauro
nsanfilippo@scfa-li.org
631-924-6822 ext. 201

*****Please note that only one Acord 25 Form is needed per Fire Department*****

I understand that my Fire Department must submit this form to the Suffolk County Fire Academy, and failure to do so will prevent me from participating in the Youth Day Event.

Participant's Signature

Date

Print Name