



# RELEASE FROM LIABILITY

\_\_\_\_\_ Chapter of National AMBUCS™, Inc.

Please read and sign the release below

For the opportunity to participate in the services offered through the AMBUCS™ ramp program, I do hereby agree that:

1. I understand and acknowledge that the activity may involve risks and dangers, including bodily injury and property damage which may result from, in whole or part, my own acts or omissions, the acts or omissions of other participants or due to conditions in which the activity takes place. I fully and knowingly assume all such risks and responsibility for any loss cost of damage I incur as a result of my participation in ramp building services provided by AMBUCS™;
2. I release, indemnify, discharge and forever hold harmless National AMBUCS™, Inc., any and all causes of action, liabilities, charges and costs whatsoever, whether in statutory or common law, which may result from or be contributed to by my participation in ramp building services provided by AMBUCS™;
3. If any provision of this waiver, release and assumption of risk is found to be unenforceable, it shall not effect the enforceability of the remaining portions, which shall be enforced to the extent permitted by law,
4. This agreement shall bind my heirs, executors, administrators, successors and assigns; and
5. I also grant (chapter name) to:

\_\_\_\_\_ take and use photographs of myself  
initials

\_\_\_\_\_ take and use photographs of my home  
initials

\_\_\_\_\_ use my name in media releases and AMBUCS™ publications  
initials

\_\_\_\_\_ use my city and state of residence in media releases and AMBUCS™ publications.  
initials

I have carefully read this agreement and fully understand its terms and have signed it freely, intending it to be a complete and unconditional release of any and all liability.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Address City State Zip Code

\_\_\_\_\_  
Phone number

**AMBUCS Chapters: Please keep for your records only.**

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