

**WISCONSIN INDIANHEAD TECHNICAL COLLEGE  
EMERGENCY SERVICES DIVISION**

**INDEMNIFICATION AND RELEASE OF LIABILITY AGREEMENT**

I, \_\_\_\_\_, certify that I am employed by \_\_\_\_\_ (Emergency Services Agency). I hereby acknowledge that I have been duly and properly informed that the WITC Emergency Services Division training course in which I am registered or enrolled involves practical exercises, which may involve strenuous physical activity. I hereby certify that I am in good physical condition and capable of performing to acceptable levels. I understand that it is my responsibility to inform the course instructors of any physical factors, conditions, injuries, or disabilities that may limit my ability to perform to acceptable standards. I understand that it is my responsibility to use sound judgment fostered by my personal knowledge of my physical condition to limit my participation in physical activities when such participation would generate an unreasonable risk of aggravating an existing injury, condition, or disability, or which would compromise my safety or the safety of others in the course.

I also understand that the nature of work in the emergency services disciplines requires that emergency services workers deal with dangerous conditions, circumstances, and elements. I understand that, to effectively minimize the risks associated with these dangers, I must employ the appropriate equipment in an appropriate manner, and that I must employ the appropriate procedures at the appropriate times. I understand that, even though the environment is controlled and the element of risk is minimized as much as possible, risks cannot be completely eliminated from any practical training exercise. I understand that it is my responsibility to use sound judgment fostered by my personal knowledge of my level of skills to ultimately ascertain if I am capable of participating in a practical exercise safely.

I understand that, if I choose not to participate in a practical exercise associated with this course, it is my responsibility to inform the course instructor(s) of my reasons or to request an appropriate accommodation which will enable me to participate in the exercise. I understand that the course instructor(s) will unprejudicially note such nonparticipation and the given reason. I understand that, upon the judgment and discretion of the course instructor(s), nonparticipation in any given practical exercise may or may not result in unsuccessful completion of the course, and that such nonparticipation, together with stated reasons, will be procedurally reported to my employing agency.

I understand that it is my responsibility to conduct myself in a prudent and cautious manner in order to contribute to the safe environment of the practical exercise. I understand that it is my responsibility to properly wear and/or utilize the appropriate safety clothing and equipment required for the specific practical exercise or activity. I certify that I have read and that I understand all safety policies, rules, and regulations as set forth regarding my involvement in this training course, exercise, or activity. I hereby agree to obey all such safety policies, rules, and regulations as well as any and all instructions and directions issued by the course instructor(s).

**Indemnification and Release of Liability:** With the above in mind, I hereby agree to the fullest extent permitted by law, to indemnify and release the Wisconsin Indianhead Technical College, its agents, officers, directors, and employees for and from any and all claims, actions, suits, or other proceedings relative to any injury to myself or death, or damage to my property or the property of others while in my control that may occur while involved in a WITC training course.

**COURSE TITLE:** \_\_\_\_\_

**INSTRUCTOR(S):** \_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_.

Signature: \_\_\_\_\_