

RELEASE

I, (*print name*) _____, residing
at (*print address*) _____, being
duly sworn, depose and say:

1. I am over the age of eighteen (18) years.

2. To the best of my knowledge and belief, I am in good physical health, and I know of no reason why my judgment would be impaired.

3. In consideration of my participation in THE HANDS-ON SKILLS SCENARIOS OF THE MEDICAL SPECIAL OPERATIONS CONFERENCE, being conducted by the New York City Fire Department ("FDNY") on Randall's Island, New York, on or about May 16 - May 19, 2019, INCLUDING ENTRY INTO COLLAPSE, CONFINED SPACE, SUBWAY AND/OR HIGH-RISE SIMULATORS, and/or other property owned or controlled by the City of New York, and/or USE OF VEHICLES, TOOLS OR EQUIPMENT owned or controlled by the City of New York ("FDNY Hands-On Skills Program"):

I HEREBY RELEASE, DISCHARGE AND HOLD HARMLESS THE CITY OF NEW YORK, its agencies, officers, employees, and agents, including FDNY ("Releasees"), FROM ANY AND ALL LIABILITY, claims, causes of action, lawsuits, judgments, damages or expenses, whatsoever, in law or equity, WHICH AGAINST THE RELEASEES, I, my heirs, executors, administrators and assigns, EVER HAD OR WILL HAVE, FOR ANY PERSONAL INJURY OR PROPERTY DAMAGE arising from the acts or omissions of Releasees in connection with my participation in the FDNY Hands-on Skills Program, including my entry upon said property and/or use of said vehicles, tools or equipment.

4. I have read and I understand the foregoing, and I have affixed my signature below.

SIGNATURE: _____

STATE OF _____)

COUNTY OF _____) ss:

Sworn to before me this _____ day
of _____, 20____.

NOTARY PUBLIC (*affix stamp or seal*)