



**MICHIGAN ARTIST BLACKSMITH ASSOCIATION
LIABILITY RELEASE FORM**

I, the undersigned, realizing the potential hazards involved in the craft of blacksmithing will not hold the MICHIGAN ARTIST BLACKSMITH ASSOCIATION, its officers, demonstrator(s), or host(s) responsible in the event of any accident or injury incurred during an association function or at any time a sponsored activity concerning blacksmithing or metal working is occurring.

I am aware of the requirement to wear safety glasses during association demonstrations and will do so. I am also aware of the possibility of hearing damage due to the nature of the craft and accept the responsibility of taking the necessary steps to protect my hearing.

It will be my responsibility to inform any family member or guest that I may bring to a demonstration of potential dangers and advise them of all necessary precautions.

Signature: _____

Date: ____/____/____