WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT
PARENT WAIVER FOR STUDENTS UNDER AGE OF 18

I parent or legal guardian of ________________________________________, hereby give permission for my child to participate in the CPR and or First Aid Training conducted by Always CPR Training Center LLC.

Waiver and Release of Liability

I certify that my child is healthy & physically fit such that he/she is able to participate and that I understand there are risks involved in CPR and or First Aid Training. I hereby voluntarily release Always CPR Training Center LLC from any and all liability resulting from or arising out of my participation and/or receipt of instruction.

I understand and agree that I am releasing not only the entities set forth above, but also the instructors, faculty members, general staff, officers, agents, and employees of those entities. I understand and agree that this Waiver/Release will have the effect of releasing, discharging, waiving, and forever relinquishing any and all actions or causes of action that I or my minor child may have or have had, whether past, present or future, whether known or unknown, and whether anticipated or unanticipated by me or my minor child, arising out of participation and/or receipt of instruction except for the acts or omissions of Always CPR Training Center LLC, its officers, instructors or employees which are found to be negligent by a court of competent jurisdiction.

I understand and agree that I am assuming full responsibility for any and all risk of death or personal injury or property damage suffered by me and/or my minor child while participating and/or receiving instruction. I understand and agree that I am agreeing to release, indemnify, and hold harmless Always CPR Training Center LLC and their officers, agents, and employees from any and all liability or costs, including attorney fees, associated with or arising from participation and/or receipt of instruction. I understand that this Waiver/Release of Liability will be binding on me, my spouse, my heirs, my personal representatives, my assigns, my children, and any guardian ad litem for said children.

I acknowledge that I have read this Waiver/Release of Liability and that I understand the words and language in it. I also understand that this Waiver/Release of Liability is valid for the duration of time that my child participates unless rescinded through my written instructions.

I am the parent or legal guardian of the minor I'm registering for this and future events, and I am signing this Authorization on behalf of registered minor.

______________________________  ______________________________  ________________
Parents Name  Parents Signature  Effective Date

The American Heart Association strongly promotes knowledge and proficiency in BLS, ACLS, and PALS and has developed instructional materials for this purpose. Use of these materials in an educational course does not represent course sponsorship by the American Heart Association, and any fees charged for such a course do not represent income to the American Heart Association.