

Liability Waiver for FDIC 2012

PennWell Corporation

1421 S Sheridan Road
Tulsa, OK 74112

You are registered to participate in our Hands-On Training class(es). Please check the class(es) below for which you are registered, complete this waiver, retain a copy, and return the original copy ASAP, but no later than April 1, 2012 to the address above. **After April 1, 2012, DO NOT MAIL THIS FORM -- bring it with you to FDIC.**

Hands-On Training

<p>4-HOUR</p> <ul style="list-style-type: none"><input type="checkbox"/> Advanced Vehicle Extrication<input type="checkbox"/> Aerial and Tower Operations NEW!<input type="checkbox"/> Engine Company: Essentials<input type="checkbox"/> Essentials of Search and Rescue<input type="checkbox"/> Fire Department Rescue Operations<input type="checkbox"/> Firefighter Escape Options NEW!<input type="checkbox"/> Flashover<input type="checkbox"/> Heavy Vehicle Extrication<input type="checkbox"/> Keeping Yourself Alive<input type="checkbox"/> Man vs. Machinery NEW!<input type="checkbox"/> Truck Company: Forcible Entry<input type="checkbox"/> Truck Company: Ventilation<input type="checkbox"/> Vent-Enter-Search NEW!	<p>8-HOUR</p> <ul style="list-style-type: none"><input type="checkbox"/> Aircraft Rescue and Firefighting<input type="checkbox"/> Collapse and Void Search Rescue NEW!<input type="checkbox"/> Conducting NFPA 1403 Live Burn Training<input type="checkbox"/> Live Fire Fist Due Tactics<input type="checkbox"/> RIT Combat Drills<input type="checkbox"/> Truck Company: Essentials<input type="checkbox"/> Urban Essentials
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WHEREAS, the undersigned is registered for one or more Hands-on Training programs ("Training") at FDIC 2012;

NOW, THEREFORE, for and in consideration of the privilege of participating in such Training provided by or on behalf of PennWell Corporation ("PennWell") at the FDIC 2012 exhibition and conference, the undersigned, for himself, his personal representative, heirs, and next of kin:

1. hereby releases, waives, discharges, and covenants not to sue PennWell, its employees, shareholders, officers, directors, show officials, equipment suppliers, agents, representatives, and show management ("Releasees") for any and all loss or damage, and any claim or demands therefore on account of accident, injury, illness, death, or harm of any type arising out of or related to the Training, whether caused by the negligence of any Releasee or otherwise.
2. hereby agrees to indemnify and hold harmless the Releasees and each of them from any loss, liability, damage, or cost they may incur arising out of or related to the Training whether caused by the negligence of Releasees or otherwise.
3. hereby assumes full responsibility for any risk of bodily injury, death, or property damage arising out of or related to the Training whether caused by the negligence of Releasees or otherwise.
4. hereby acknowledges that the activities involved in the Training are of a hazardous nature and contain inherent risks of serious injury and/or death and/or property damage. The undersigned also expressly acknowledges that injuries received may be compounded or increased by negligent rescue operations or procedures of the Releasees.
5. hereby agrees that this Liability Waiver extends to all acts of negligence by the Releasees, including negligent rescue operations, and is intended to be as broad and inclusive as is permitted by the laws of Indiana and that if any portion thereof is held invalid, the undersigned agrees that the balance shall continue in full force and effect.

I, THE UNDERSIGNED, HAVE READ THIS WAIVER OF LIABILITY, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Print Name and Title _____ Signature _____

FDIC Badge # _____ Department Name _____

PREREQUISITE TRAINING REQUIREMENTS (THIS SECTION TO BE SIGNED BY YOUR CHIEF)

All students in the classes indicated above must meet a minimum standard of training. Students must meet the qualifications of the National Fire Protection Association, Standard 1001 – Fire Fighter Professional Qualifications.

By signing below, the Chief of your Department is indicating that you meet the qualifications of NFPA Standard 1001 – Fire Fighter Professional Qualifications.

Date ___/___/___ Printed Name of Chief _____ Chief's Signature _____