



Release Form

WHEREAS, the undersigned Releaser desires to use the facilities, machinery, material, and equipment at the Glass Studio operated by the above Release Diablo Glass & Metal, LLC and Diablo Glass & Metal, LLC desires to rent the use of the facility to the Releaser, and; /

WHEREAS, the undersigned Releaser acknowledges that the use of said machinery and equipment including the use of the furnaces is inherently dangerous and can cause injury.

WHEREAS, the undersigned will be fully informed of the said potential danger and desires to proceed with said use.

NOW THEREFORE, in consideration of the Release allowing the Releaser to use its facilities and other mutual promises contained herein, the undersigned Releaser promises promptly to indemnify and hold harmless the Release, its servants, agents, employees and assigns against any and all causes of action, claims, liens (including without limitation those of insurance carriers and medical providers), demands, liability, actions, rights, damages of any kind or nature, costs, charges, losses, expenses and attorneys' fees arising directly or indirectly from his or her use of the facilities and the machinery and equipment and material found therein. The Releaser further acknowledges that the Release is relying on Releaser's representation that he or she is familiar with the use of all equipment and machinery and upon Releaser promises to use the premises and related equipment, machinery and materials in a careful and responsible manner.

Releaser provides irrevocable, perpetual consent to and authorization of Diablo Glass School to create photographs of Releaser and pieces created while at Diablo Glass School, to use, reproduce and distribute in any media *only* for the purpose of promoting programs presented by Diablo, and other educational purposes, worldwide. Releaser understands they will not be paid money, and provides this consent and authorization.

Releaser agrees to subscribe to Diablo Glass Schools internal email newsletter by providing an email address.

Releaser acknowledges and swears that they are not knowingly pregnant or nursing (for hot shop and flame shop classes) during the time of their visit(s).

Release further warrants that this document has been read and understood by the Releaser prior to execution of the same.



Coronavirus guidelines and procedures

- Up-to-date masking guidance from the city of Boston, MA and the state of MA will be followed
- Students must follow handwashing and equipment disinfecting procedures as indicated by their instructor.
- Please print and complete the release form available [here](#) before coming to class.

Due to the 2019-2020 outbreak of the novel Coronavirus (COVID-19), our business is taking extra precautions with the care of every client to include health history review and enhanced sanitation/disinfecting procedures in compliance with CDC guidance.

Symptoms of COVID-19 include but are not limited to:

- 🕒 Fever
- 🕒 Fatigue
- 🕒 Dry Cough
- 🕒 Difficulty Breathing
- 🕒 Loss of sense of taste and/or smell

I agree to the following:

- 🕒 I understand the above symptoms and affirm that I, as well as all household members, do not currently have, nor have experienced the symptoms listed above within the last 14 days.
- 🕒 I affirm that I, as well as all household members, have not been diagnosed with COVID-19 within the past 30 days.
- 🕒 I affirm that I, as well as all household members, have not knowingly been exposed to anyone diagnosed with COVID-19 within the past 30 days.
- 🕒 I affirm that I, as well as all household members, have not traveled outside of the country or to any city considered to be a “hot spot” for COVID-19 infections within the past 30-days.
- 🕒 I understand that Diablo Glass School cannot be held liable for any exposure to the COVID-19 virus caused by misinformation on this form or the health history provided by each client.

I hereby confirm that I have read, understand, and agree to all above information.

I hereby release Diablo Glass School from any and all liability for unintentional exposure or harm due to COVID-19.

Witness my hand and seal this day (date)

X _____ Date: _____
Signature of Releaser (Parent or Guardian if Releaser is a Minor)

X _____
Printed Name of Releaser (*please print here*)