Janke Studios, Inc.

**RELEASE OF ALL CLAIMS**

I understand that some processes and machinery used in **Janke Studios, Inc.** may be inherently dangerous. I understand that I participate in this class solely at my own risk. I have read the safety rules presented to me and listed below and understand them fully. Additional safety rules are posted in the studio. Failure to follow safety rules and procedures may result in dismissal from the class. **There are no refunds for classes.**

**Safety Rules for Janke Studios**

**1)** When operating machinery such as grinder, bench torches, and soldering torches,

loose clothing must not be worn. Long hair must be secured behind the head.

**2)** Safety goggles **must** be worn when using machinery and during all glassblowing instruction.

**3)** Reasonable care must be taken when around an open flame. Follow all Instructor instructions and always wait until the object heated cools before touching.

**4) Covid19** or other contagious illness release. I acknowledge that I am solely responsible for my health and the health and well-being of my family, friends participating or not. I will follow all studio required precautionary measures as requested and posted or risk being asked to leave

I hereby release and discharge Janke Studios, Inc., 659 Auburn Avenue, P.O. Box G11 (Glassblowing Studio), Atlanta, County of Fulton, State of Georgia; its' successors or assigns; its' agents, employees, officers, and directors for all personal injuries, known or unknown, and injuries to property, real or personal, caused by existing, or hereafter arising out of the above described activities.

*Thank you for visiting us!*

*Janke Studios, Inc.*

**I, the undersigned, on the date indicated, have read this release and understand all its terms. I execute it voluntarily, with full knowledge of its significance, as a condition to participating in the class.**

**(over)**

**Release made this day,\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,2024\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**