

MIRABELLA-FINCH STUDIO
ROGER FINCH
4510 PEACH ORCHARD RD. (HWY-25)
HEPHZIBAH, GA. 30815
(No mailbox or mail received at this address)
(706)-592-2384

SHOP HAZARDS DISCLAIMER

Every one entering the studio must read and sign this form.

This is a working art studio; there are projects going on at all times. Because of this there are hazards and dangerous situations present. We use equipment that operates at temperatures of over 50,000° F. You will use tools and power equipment capable of dismemberment, death, or blindness. Sharp or heavy metal can cut or be dropped causing wounds or broken toes. Ultraviolet radiation present while welding can cause a severe sunburn or eye damage if proper protection is not used. There are gases that, if proper procedures are not followed, can explode. The above constitutes some but not all possible hazards present in the shop. Everyone must be aware of the possibility that severe injury could occur in this shop.

You also assume all risk in using any of the information that is provided in this class. Roger Finch and the Gertrude Herbert Institute of Art (and any of its instructors or agents) specifically disclaim any responsibility or liability for damages or injuries incurred as a result of the use of any verbal or written information provided.

Electric arc welding and cutting processes (plasma) produce intense electric and magnetic (electromagnetic) fields. **Persons with a pacemaker** should not go near welding or cutting operations until they have consulted their doctor and obtained information from the manufacturer of the device.

I have read and understand the hazards of working in this studio and the use of information provided. I hereby release and hold harmless Roger Finch and the Gertrude Herbert Institute of Art (and any of its instructors or agents) for injuries which may arise out of my participation in this class.

The information given below will be kept confidential and only be used to contact you. It will not be released to anyone.

Please Clearly PRINT

Mailing Address: Name _____
Street _____
City _____ State _____ Zip _____
Phone: Home: _____ Cell _____
Work _____
E-mail _____

Signed _____ Date _____