

**ADULT PARTICIPANT RELEASE, WAIVER OF LIABILITY,  
AND INDEMNITY AGREEMENT**

Participant's Name: \_\_\_\_\_

Participant's Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**ASSUMPTION OF RISK**

Barnstable County, through its Cape Cod Cooperative Extension program, offers educational information on food preservation and food safety, including free testing of privately-owned pressure cookers. **All** use of a pressure-cooker, including use for food canning, involves **RISK OF INJURY OR DEATH** to you or others, despite the precautions taken. The County will test your pressure-cooker gauge, but you should know that testing will not make pressure-cooking and canning free of risk.

*Such risks include but are not limited to: **Food poisoning**, including risk of poisoning by botulism or other microorganisms, which can lead to illness and even death, and **burns, injury, or death** from improperly used or maintained pressure-cooking equipment.*

Good pressure-cooking equipment that is properly tested and adjusted still may not protect against the risk of food poisoning, burns, or injury unless it is used properly. **Obtain and follow pressure-cooking and food canning safety guidelines before cooking or canning any food, or serving any canned food.** Food poisoning, burns, and injury could affect you and your family and friends' futures, including the ability to make a living, engage in business, participate in social and recreational activities, and enjoy life.

In consideration of the County's service of testing a pressure-cooker gauge, I voluntarily agree to assume **ALL RISKS**, including death, serious bodily injury, and illness resulting from the use of the tested gauge. I understand that this testing must be done periodically, and that **current information based on scientific research about** canning and food preservation is available through government agencies. I understand that I should obtain and follow canning safety guidelines before canning any food or serving food that has been canned. I understand and appreciate the **RISKS, INCLUDING POSSIBLE DEATH**, associated with the improper use of home canning equipment.

**RELEASE OF LIABILITY**

In consideration for testing a pressure-cooker gauge, I **RELEASE** the Commonwealth of Massachusetts and all of its agencies and subdivisions, including Barnstable County and its Cape Cod Cooperative Extension program, as well as any officers, employees, or agents of the Commonwealth and/or County, from all liability, claims, costs, and expenses of loss of personal property, injury, death and/or loss suffered by me, my family, and any third parties to whom I am responsible, as a result of the use of the tested pressure-cooker gauge, including use for canning food.

I have read this document and certify that I am fully informed about the **RISKS** associated with pressure-cooking and canning. I understand this document is a contract with the Cape Cod Cooperative Extension program of Barnstable County. I sign this contract freely and voluntarily.

Name (Printed): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_