

3D Printer Waiver and Agreement of Use

Read the following information very carefully and be sure that you understand it fully before signing. This form must be completed before participating in the use of the 3D printer.

Participants Agree:

- Safety is the top priority, and the facilities, tools and materials must be used in a safe and appropriate manner.
- If a tool requires training, it will not be used until training has been provided by library staff.
- Items that fit the definition of weapon as deemed by library staff or any parts to create a weapon cannot be created.
- To comply with the Internet Acceptable Use Agreement and Patron Behavior Policy which states:
 - o Disruptive, destructive, dangerous, or illegal behavior will not be tolerated.
- Children under the age of 12 will be accompanied by and supervised by an adult (unless otherwise specified by the program coordinator).
- When available usage will be on a first-come, first-serve basis. Time limits may apply.
- Material fees will apply, and current costs will be posted next to the 3D Printer.

I _____ (participant) have read and understand the East Hampton Public Library 3-D Printing regulations listed above and am fully aware that participating in Makerspace activities including use of the 3D printer may result in risk of personal injury or harm.

I hereby release and hold harmless the East Hampton Public Library, its directors, officers, employees, volunteers, committees and boards, from and against all liability, and I and any parent or guardian signing for me below hereby agree to indemnify them against any loss, damages, claims, costs (including attorneys' fees) or actions of any type, resulting from bodily injury, property damage, or any other loss that may result from my participation in any Makerspace activity or program, including use of the 3D printer to the extent permitted by law.

I have read and understand this release, indemnification, and hold harmless form. I voluntarily sign it and hereby give my permission to the East Hampton Public Library for emergency transportation or treatment in the event of illness or injury. I hereby accept responsibility for payment of any emergency transportation or treatment. I further certify I have no medical or physical conditions that would restrict my participation in this activity or program.