



Release, Waiver, & Indemnification

I, _____, for good and valuable consideration of which receipt is hereby acknowledged, specifically release, remise and forever discharge Appliance Doctor, Inc., its employees, servants, agents and/or assigns from any and all liability which may arise as hereinafter outlined, and payment of and my signature on this form further constitutes my acceptance and understanding of the terms, conditions and information contained herein.

I acknowledge that I understand and accept the risks of this repair service. I represent that I am of sound mind, competent, do not have any physical, mental or other impairments or disabilities that may affect my ability to make decisions. I specifically acknowledge that the following persons and/or entities, including but not limited to, Appliance Doctor, Inc., its owners, directors, administrators, employees, servants, agents and/or assigns are not responsible for any damage caused to my home during this, or any repair visit. I specifically Release and Discharge those parties from any and all liability, whether known or unknown, even though the liability may arise out of the negligence or carelessness on the part of the persons or entities mentioned above. I agree to accept any and all responsibility for the risks, conditions and/or damage which may occur.

Being fully aware of the risks, conditions and/or hazard potential, I hereby agree to Waive, Release and Discharge any and all claims, demands, actions and/or causes of action which I may have hereinafter accrue as a result of damage to my home, against any person or entity whether such injury or damage was foreseeable.

I further expressly agree that the foregoing Release, Waiver and Indemnification is intended to be governed by the laws of Pennsylvania and is intended to be as broad and inclusive as is permitted by the laws of Pennsylvania, and that if any portion of it is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I have read, understand and voluntarily signed the release, waiver of liability and indemnity agreement, and further state that no oral representations, statements or inducements apart from the foregoing written agreement have been made.

| | |
|------------------------------|-------------|
| _____ | _____ |
| Signature of Releasor | Date |
| _____ | _____ |
| Witness | Date |