[Your Company Name] [Your Company Address] [City, State, ZIP] [Phone Number] [Email Address] [Website]

Waiver of Liability Form for Contractors

Contra	actor's Full Name:						
Contra	actor's Address:						
City: _		_ State:	ZIP:				
Phone	Number:	Email:					
	undersigned Contractor, her ons of this Waiver of Liability:	eby acknowle	dge and agree t	o the following terms a	nd		
1.	Nature of Services: I understand that I am engaging in work and providing services for [Your Company Name] as an independent contractor. The scope of services to be provided will be specified in a separate agreement or contract between [Your Company Name] and myself.						
2.	Assumption of Risk: I acknowledge that the services I will be providing involve certain risks and hazards. I assume all risks associated with the performance of my services including but not limited to accidents, injuries, property damage, and any other risks inherent in the nature of the work to be performed.						
3.	Release and Indemnification: In consideration of being engaged as a contractor [Your Company Name], I hereby release, discharge, and hold harmless [Your Company Name], its officers, directors, employees, agents, and affiliates from any and all claim demands, actions, causes of action, liabilities, costs, expenses, or damages of any kin that may arise out of or in connection with my provision of services.						
4.	industry standards while perf	mpliance with Laws: I agree to comply with all applicable laws, regulations, ustry standards while performing services for [Your Company Name]. I will obtain ntain any required licenses, permits, or certifications necessary for the provisio services.					
ackno	e carefully read and fully un- wledge that I am voluntarily of and conditions.			•			
Contra	actor's Signature:						