



Waiver of Liability for a Minor

This form must be completed and submitted to Hire Dynamics prior to the first day of work.

PLEASE PRINT

Name: _____

Birth date: _____

Address: _____

Home Phone: _____

E-mail address: _____

Emergency Contact Name: _____

Emergency Phone: _____

This Release and Waiver of Liability (the "Release") executed on this _____ day of _____, _____, _____
Date Month and Year

by _____ a minor child (the "Candidate"),
Candidate Name

and _____, the parent having legal custody and/or the legal guardian of
Parent/Guardian Name

the candidate (the "Guardian"), is in favor of Hire Dynamics, LLC, their directors, officers, employees, and agents (collectively, "Hire Dynamics") of the following:

The Candidate and Guardian desire that the candidate work for Hire Dynamics and engage in the activities related to being an employee/worker (the "Activities"). Candidate and Guardian do hereby release and forever discharge and hold harmless Hire Dynamics and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from Candidate's Activities with Hire Dynamics. Candidate and Guardian understand that this Release discharges Hire Dynamics from any liability or claim that the Candidate or Guardian may have against Hire Dynamics with respect to any bodily injury, personal injury, illness, loss of life, or property damage that may result from Candidate's Activities with Hire Dynamics, whether caused by the negligence of Hire Dynamics or its officers, directors, employees, or agents or otherwise. Candidate and Guardian also understand that Hire Dynamics does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance in the event of injury or illness. Hire Dynamics will only pay candidate for hours worked and approved by supervisor.



Candidate and Guardian do hereby release and forever discharge Hire Dynamics from any claim whatsoever which arises or may hereafter arise on account of first aid, treatment, or service rendered in connection with the Candidate's Activities or with Hire Dynamics with the decision by any representative or agent of Hire Dynamics to exercise the power to consent to medial or dental treatment as such power may be granted and authorized in the Parental Authorization for Treatment of a Minor Child. I further agree with them that no suit or action at law shall be instituted for the above reasons by others or me in Candidate's or Guardian's behalf. Candidate and Guardian hereby agree and consent to allow Candidate and Guardian expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Georgia, and that this Release shall be governed by and interpreted in accordance with the laws of the State of Georgia. Candidate agrees that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

IN WITNESS WHEREOF, Candidate and Guardian have executed this Release as of the day and year first above written.

Candidate Print Name: _____

Signature of Candidate: _____ Date: _____

Parent or Guardian Print Name: _____

Signature of Parent or Guardian: _____ Date: _____

Parent or Guardian Phone Number: _____

Hire Dynamics Representative Print Name: _____

Signature of Hire Dynamics Representative: _____ Date: _____