

The International Association of Computer Investigative Specialists

VENDOR AND STUDENT WAIVER AND RELEASE AGREEMENT

Name of Vendor/Student: _____

Address: _____

Phone Number: _____

The International Association of Computer Investigative Specialists' ("IACIS") Orlando training event (the "Event") educates students through classes that combine computer forensic theory and hands-on practical exercises. In consideration of my participation in the Event, I execute this Waiver and Release ("Waiver") as of the date below. I understand that this Waiver includes, among other things, **a waiver of my ability to bring claims against IACIS** as an entity and its past and present directors, officers, employees, representatives, volunteers, and agents, in both their individual and professional capacities (hereinafter, collectively, the "Released Parties") for any and all personal injuries, damages, or losses relating to or arising from volunteering with IACIS.

RESPONSIBILITIES. I understand and acknowledge that I have a duty to conduct myself in a manner that is consistent with IACIS' values and mission at all times while participating in the Event. I agree to follow all instructions, recommendations, and cautions of IACIS at all times during my participation in the Event. I acknowledge that I have read and agree to the attached "IACIS 2022 Training Event COVID19 Plan," and I agree that that my failure to abide by all instructions, recommendations, and cautions of IACIS at all times during my participation in the Event may result in my expulsion from the event without compensation for costs and losses I may incur as a result.

UNDERSTANDING OF RISK. I HEREBY AGREE TO ACCEPT AND ASSUME ALL RISKS OF PERSONAL INJURY, ILLNESS, DISABILITY, DEATH, AND/OR PROPERTY DAMAGE, ARISING FROM MY PARTICIPATION IN THE EVENT, WHETHER CAUSED BY THE ORDINARY NEGLIGENCE OF IACIS OR OTHERWISE. I UNDERSTAND THAT THE EVENT WILL TAKE PLACE IN PERSON, INCLUDING -IN ONE OR MORE INDOOR ROOMS WITH OTHER PEOPLE PRESENT, AND THUS THE EVENT PRESENTS THE RISK OF EXPOSURE TO AND CONTRACTING COVID19. I VOLUNTARILY ACCEPT THIS RISK.

RELEASE AND WAIVER OF LIABILITY AND COVENANT NOT TO SUE. I recognize that I have been granted the privilege of participating in the Event. In consideration of that privilege, I and my heirs, executors, administrators, and assigns, hereby assume all risks and dangers of my engagement with IACIS and **forever release, acquit, and discharge the Released Parties, both in their individual and professional capacities, from all present and future liability from any and all claims, demands, or causes of action (including costs and attorneys' fees) arising out of or in any way connected, whether directly or indirectly, to my participation with IACIS, including, without limitation, any and all claims arising in whole or in part out of the negligence of any one or more of the Released Parties or third parties.** It is my intention that this Waiver extend to all of my activities with IACIS related to the Event, regardless of location.

Student/Vendor Signature _____

Date _____