2024 TONOPAH HISTORIC MINING PARK BLACKSMITHING CLASSES

Location:	Tonopah Histor	ic Mining Parl	k				Class Dates	1	List Specific Date(s)
	110 Burro Aven	ue					June 29 and/or 30		
	Tonopah, Nevad	la 89049					July 13 and/or 14		
Website:	www.TonopahN	liningPark.com	m				July 27 and/or 28		
2-Day Class	\$200.00		(Discout	5	Family & Frier	0,	Aug 10 and/or 11		
1-Day Class				Call for add	itional informat	ion	Aug 24 and/or 25		
Times:	Saturday	8:00 AM	to	5:00 PM			Sept 14 and/or 15		
	Sunday	8:00 AM	to	5:00 PM			Sept 28 and/or 29		
Ð	www.TonopahN	evada/Lodgin	B				Oct 12 and/or 13		
AT .							Oct 19 and/or 20		
Questions:	Contact Jeff M	•					List date(s) other	_	
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Classes Tailored to Individual Skill Levels

Classes are designed for those with an interest in learning the fundamentals of blacksmithing, or increasing your knowledge and skill level for returning students. Basic Students will learn to light and work with a coal forge toheat metal to more than red hot, then to use hammers and other tools to forge, bend and twist the hot metal to desired shapes. Students will work hands-on with coal burning forge and learn to forge iron into useful and decorative items.

Our classes are intedted for adults. However, responsible, well-behaved youths are invited to participate when accompanied by an adult also taking the class.

We are offering classes specifically geared toward those with advanced skill levels. For dates contact Jeff Martin at 775-482-9274 or email tonopahminingpark@gmail.com

SAFETY REQUIREMENTS:
1. Long Pants Only. No Loose Fitting Clothing (recommend 100% cotton)
2. Closed Toe Shoes Only
3. Safety Glasses/Goggles (we will provide if you do not have)
5. Hair must be pulled up/back away from face & shoulders (if applicable)
6. No Jewelry

We recommend a hat to protect you from the sun, bring plenty of drinking water and plan for lunch on your own.

INDEMNIFICATION AND RELEASE OF LIABILITY

I understand and agree that neither the Town of Tonopah or the Tonopah Historic Mining Park, any organizers, promotors, or sponsors involved in Blacksmithing Classes held at the Tonopah Historic Mining Park, nor any of their respective employees, officers, agents or assigns (hereinafter collectively referred to as the "Released Parties"), may be held liable or responsible in any way for injury, death or other damages to me or my family, heirs or assigns that may occur as a result of my participation in the Blacksmithing Class.

I therefore hold harmless the Released Parties from any claim or lawsuit for personal injury, wrongful death, and property damage or for other damages, by me, my family, estate, heirs or assigns, arising out of my participation in the Blacksmith Classes.

I understand that my participation in the Blacksmithing Classes involves certain inherent risks, including but not limited to the risk of possible injury. Despite these risks, I still choose to participate in the Blacksmithing Classes.

With respect to the Released Parties, I assume all risks in connection with my participation in the Blacksmithing Classes.

Furthermore, I recognize and assume the risk of all injuries, damage or loss regardless of the severity as a result of participating in any and all activities associated with the Blacksmithing Classes. I agree to waive and relinquish all claims I have as a result of participating in the Blacksmithing Classes against the Town of Tonopah, its' officers, agents, servants and employees.

I do hereby fully release and discharge the Town of Tonopah and its officers, agents, servants and employees from any and all claims from injuries damages or loss which I may have, or which may accrue to me and arising out of, connected with, or in any way associated with the activities or the Town of Tonopah, to include all claims arising out of connected with the activities of the Blacksmithing Classes.

In the event of any emergency, I authorize Town of Tonopah officials to secure from any licensed hospital, physicians and/or medical personnel any treatment deemed necessary for my immediate care and agree that I will be responsible for payment of any and all medical services rendered.

I have read and fully understand the above information, warning of risk, assumption of risk, and waiver and release of all claims and permissions to secure treatment, to which I have affixed my original signature and have dated the same document.

Participants Name (Print):	
Signature:	Date:
If a participant is under the age of 18 a parent or legal guardian must sign.	
Name of Parent or Legal Guardian (Print):	
Signature:	Date: