

**Waiver of Liability Agreement  
for the  
Underride Crash Test Event  
NCSHP Driver's Training Facility  
380 East Tryon Rd, Raleigh, NC 27603**

**Friday, September 13, 2024**

This agreement releases *AnnaLeah & Mary for Truck Safety* and *Collision Safety Consulting, PLLC* (and all individuals conducting the tests including Jerry Karth, Marianne Karth, and Aaron Kiefer and all volunteers involved), as well as the North Carolina State Highway Patrol, from all liability relating to injuries that may occur during the Underride Crash Test Event.

By signing this agreement, I agree to hold *AnnaLeah & Mary for Truck Safety and Collision Safety Consulting, PLLC* (and all individuals conducting the tests including Jerry Karth, Marianne Karth, and Aaron Kiefer and all volunteers involved), as well as the North Carolina State Highway Patrol, entirely free from any liability, including financial responsibility for injuries incurred, regardless of whether injuries are caused by negligence.

I also acknowledge the risks involved in a crash test event. These include, but are not limited to, injury from the crash testing which could occur if I were to cross the barriers erected for safety purposes on the crash test track.

I swear that I am participating voluntarily, and that all risks have been made clear to me. Additionally, I do not have any conditions that will increase my likelihood of experiencing injuries while engaging in this activity.

By signing below, I forfeit all right to bring a suit against *AnnaLeah & Mary for Truck Safety and Collision Safety Consulting, PLLC* (and all individuals conducting the tests including Jerry Karth, Marianne Karth, and Aaron Kiefer, and all volunteers involved, as well as the North Carolina State Highway Patrol), for any reason. In return, I will receive the opportunity to view underride crash testing in person and to view the results up close. I will also make every effort to obey safety precautions as listed in writing and as explained to me verbally. I will ask for clarification when needed.

I, \_\_\_\_\_, fully understand and agree to the above terms.

(Print name in full)

Participant Signature \_\_\_\_\_

Date \_\_\_\_\_