Explosives On-Set Waiver Form

Production Information

| Production Title |
|--|
| Production Company |
| |
| Filming Location |
| Date(s) of Use |
| |
| Participant Information |
| Full Name |
| Role/Position |
| Contact Number |
| Email Address |
| |
| Acknowledgement & Release |
| I acknowledge that explosives will be used on set and that participation involves inherent risks, including but not limited to injury, property damage, or fatality. I hereby voluntarily assume all risks associated with my participation and agree to release the production, its employees, contractors, and representatives from any liability arising from such participation. |
| I confirm that I have been briefed on safety procedures for explosives and will comply with all instructions provided by the production's authorized personnel. |
| Participant Signature |
| Date |
| |

| Production Representative Signature |) |
|-------------------------------------|--------------|
| | |
| Date | |
| | |