



It's About Smile Nonprofit
931-B South Amin Street #135
Kernersville, NC 27284
Ph. 336.701.7884
www.ItsAboutSmile.org

Waiver of Liability

This agreement releases *It's About Smile* from all liability relating to injuries that may occur during or after services rendered. By signing this agreement, I agree to hold *It's About Smile* 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 dentistry. Though these risks may be rare they include but are not limited to bleeding or infection (if not properly managed). Consent forms will be required for treatment and all procedures. I understand 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 *It's About Smile* for any reason. In return, I will receive reduced cost dentistry. 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.

Participant Signature

Date

Witness Signature

Date

