

Professional Services Indemnity Form

Date:

Service Provider Details

Full Name / Organization Name:

Contact Information:

Address:

Client Details

Client Name:

Contact Information:

Scope of Services Provided

Please describe the services to be provided:

Indemnity Clause

The Service Provider hereby agrees to indemnify and hold harmless the Client from and against any and all claims, losses, damages, liabilities, costs, and expenses (including, but not limited to, legal fees and expenses) arising out of or in connection with the provision of professional services as described above, except to the extent that such claims, losses, damages, liabilities, costs, or expenses are due to the negligence or willful misconduct of the Client.

Limitations or Exclusions of Indemnity (if any):

Service Provider Signature

Date: _____

Client Signature

Date: _____

Important Notes

- This form serves as a legal document — review all terms carefully before signing.
- Both parties should fully understand the scope and limits of indemnity.
- Consider seeking legal advice before entering into any indemnity agreement.
- Keep a signed copy of this form for your records.
- Any changes or amendments should be documented and signed by both parties.