

FarmWise Education Registration Form-Family

|   |   |
|---|---|
| <b>Registration Information:</b>  | *Please fill out form and send in for registration.                         |
| Parents Names:  |   |
| Children's Names and Ages:  |   |
| Address:  |   |
| City, State & Zip.  |   |
| Email Address:  |   |
| Home Phone:   | Cell Phone:   |
| Please list any allergies or other special concerns.  |   |
| <b>Payment:</b>   |   |
| Program Registering for:  | Date(s) of Program:   |
| Deposit must be included with registration*   | <input type="checkbox"/> Discount? What type:<br>Amount to be paid \$ _____ |
| <input type="checkbox"/> Paid in full. Amount: \$ _____   | Please circle payment method:<br>Cash   or   Check                          |
| Full payment is due upon arrival as well as <b>Emergency Form with copy of your insurance information.</b>  |   |
| All programs are subject to cancellation due to enrolment or other circumstances. In the event of a cancelation deposits will be refunded in full |   |
| *Deposits are non-refundable, unless the program is cancelled.  |   |
| <b>Insurance Information:</b>   |   |
| Insurance Plan (please include a photo-copy of insurance card):   |   |
| Insurance plan number:  |   |
| Medical Info-Medications:   |   |
| Medical Info-Allergies, Other:  |   |

Liability Release for (Names of participants) \_\_\_\_\_

FarmWise LLC aims to provide participants with an opportunity to interact with farm life and its associated tasks, experiences, and responsibilities. I acknowledge that these opportunities take place in a real farm and outdoor environment, which contains inherent risks of injury to me/child. I accept that working in an agricultural environment, around tools and animals involves certain inherent risks. These risks include, but are not limited to, the risks of possible injury as a result of contact with animals, metal objects, stinging insects, or from over exertion or environmental conditions. Despite these risks, I still choose to allow my child to engage in these activities. I know of no physical limitations that should keep me/child from engaging in these activities. In consideration for me/my child being allowed to participate in these activities, I hereby personally assume all risk, whether foreseen or unforeseen, for any harm, injury, or damage that may befall me/my child as a participant. I hereby release, on behalf of myself, my child, my heirs, executors, administrators, and assigns, FarmWise LLC, its directors, employees and volunteers, from any and all liability for any injury, death, or other damages to me, my child, my family, heirs, or assigns that may occur as a result of me/my child's participation in these activities, a result of product liability, or the negligence of any party, including FarmWise LLC, whether passive or active.

I further agree, on behalf of myself, my child, my heirs, executors, administrators, and assigns, that I will defend, indemnify, and hold FarmWise LLC and its directors, employees and volunteers harmless against any claims, demands, and causes of action, including court costs and attorney's fees, directly or indirectly arising from and actions or proceedings brought by or prosecuted for my benefit contrary to this release.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Photo and Film Release for (children's name) \_\_\_\_\_

By signing below, I hereby authorize FarmWise LLC to publish photos and/or video film of myself and or my son/daughter or ward on the official FarmWise Education website and/or for our brochures, commercials, promotional material, and/or newsletters. The photos and/or film will be used to aid visitors to help them get a visual depiction of the FarmWise experience. I stipulate by signing below that the photos and/or film not be identified in any way with personal information other than first names. (i.e., last name, address, phone number or any other identifying information) The photos and/or film will not be used for any other purpose than the stated purpose above, and only those deemed most advantageous for the purpose intended and that most accurately depict the subject matter may be used.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_