



# 2018 Youth Farming Classes

Sessions- Circle the Ones you are Registering For

**Session 1:** June 11<sup>th</sup> to 14<sup>th</sup> Sp

**Session 2:** Jul 9<sup>th</sup> to July 12<sup>th</sup>

**Session 3:** Jul 16<sup>th</sup> to July 19<sup>th</sup> Sp

**Session 4:** Jul 23<sup>rd</sup> to July 26<sup>th</sup>

**Session 5:** July 30<sup>th</sup> to Aug 2<sup>nd</sup>

**Session 6:** Aug 6<sup>th</sup> to Aug 9<sup>th</sup> Sp

**All Camps run from 9am-2pm  
Suggested Ages 6-11**



Tuition is \$250 per session.

Please mail completed form with payment, signed liability and photo release form to:

**Ollin Farms  
8627 N. 95th St. Longmont, Co.80504**

Child name \_\_\_\_\_

Sex \_\_\_\_\_ Age during class \_\_\_\_\_

Grade in fall \_\_\_\_\_

School \_\_\_\_\_

Allergies and Diet restrictions \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_



Parent name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Other: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_



## 2018 Youth Farming Classes

### Release of Liability Waiver and Photo Release form.

I understand that I am enrolling my child in on-farm educational classes and that these classes are not part of a licensed child care facility. I understand that while safety is an integrated part of the Youth farming classes, there are risks involved in participation in recreational activities.

I, \_\_\_\_\_, on behalf of my minor child, \_\_\_\_\_, expressly understand and agree that Ollin Farms, employees, volunteers and/or owners shall not be held responsible to any claims from any liability of personal injury, death, or property damage through my child's participation in the Ollin Farms 2018 Youth farming classes. I am fully aware, understand and acknowledge that my child will be involved in physical activities, both outside and indoors, during the class, including farming activities, interaction with animals, soil, and gardening, that my child will engage in that may result in physical injury. I understand and acknowledge that these activities have inherent risks associated with them, and I knowingly assume those risks, release and covenant not to sue Ollin Farms for any liability whatsoever resulting from my child's participation in the activities of the Farming class. In the event of an injury, I consent to emergency medical attention for my child.

Yes, \_\_\_ I give permission for photographs taken of me/my child while participating in the summer classes to be used in marketing/public relations material in the promotion of future classes.

Signed this \_\_\_ day of \_\_\_\_\_, 2018.

Parent/Guardian printed name \_\_\_\_\_

Parent/Guardian signature \_\_\_\_\_

Participant name (please print) \_\_\_\_\_