




Spring Break 2015 Youth Farming Classes

<p>April Monday 6th to Thursday 9th From 9:00am to 2:00pm Suggested Ages 5-11 Cost \$225.00</p>	<p></p> <p>Mail completed form with payment and liability waiver signed to: 8627 N. 95th St. Longmont, Co.80504</p> <p>Child name _____</p> <p>Sex _____ Age during class _____</p> <p>Grade in fall _____</p> <p>School _____</p> <p>Allergies and Diet restrictions _____</p> <p>_____</p>
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Parent name :	_____	Phone :	_____
Address:	_____		
Email:	_____	Other phone:	_____
Emergency Contact:	_____	Phone:	_____



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Release of Liability Waiver

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 Spring Break 2015 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, gardening, and arts and crafts 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.

Signed this ____ day of _____, 2015

Parent/Guardian printed name _____

Parent/Guardian signature _____

Participant name (please print) _____