

Newton Community Farm Liability Release/Waiver, Photo Release, Emergency Contact Info for 2017

**PART 1 – LIABILITY RELEASE AND WAIVER**

Please read this Liability Release and Waiver (“Waiver”) carefully before signing it. This Waiver affects your legal rights. Before participating in any program, class, activity (“Activity”) sponsored by Newton Community Farm, each participant must read, understand, and sign this Waiver (or, if under 18 years of age, have his/her parent or legal guardian sign it on his/her behalf).

I understand that participation in an Activity sponsored by Newton Community Farm (NCF) may be located on farmland or in other outdoor spaces and that engaging in such Activities may pose the risk of physical injury or other harm. I also understand that part of the risk involved is dependent on my own state of fitness or health and the awareness, care, and skill with which I conduct myself while participating in the Activity.

By signing this Waiver, I agree to release Newton Community Farm from any cause of action, right, or claim arising out of, connected with, or resulting from my participation in any Newton Community Farm Activity. I assume the risk of any injury that I may incur during my participation in that Activity. I have read and freely agree to the terms of this Waiver. I understand and knowingly recognize that this Waiver is a contract with legal consequences, and by signing it, I intend to be bound by its terms.

Print name of participant: \_\_\_\_\_

If participant is under 18 years of age, print name of parent or legal guardian:  
\_\_\_\_\_

Signature of participant (or signature of parent or legal guardian if participant is under 18 years of age);

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PART 3 – PHOTO RELEASE**

Newton Community Farm often takes photographs to document its work and activities. Newton Community Farm seeks your permission to publish in print, electronic, video, or any other medium, the likeness or image of each participant for the general promotion of NCF programming. If you consent to the publishing of such photographs, please sign your name below. (If participant is under 18 years of age, please sign name of parent or legal guardian.) If you do not consent, please leave this field blank.

I consent to the taking and/or publishing of my photograph: \_\_\_\_\_

**PART 3 – EMERGENCY CONTACT INFORMATION**

In case of emergency, who would you like us to contact?

Name of contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Relationship to you: \_\_\_\_\_