



Minor Liability Waiver

Parent or Legal Guardian:

You are required to read the following information very carefully and make sure that you understand it fully and sign it before allowing your child to participate in this activity or program.

I, _____, am fully aware that participation in
Name of Parent/Guardian

_____ may result in risk of personal
Name of Activity/Program

injury or harm to my child. I hereby agree to release and hold harmless GARDEN FARMS OF NEVADA / GARDEN FARMS FOUNDATION its officers, employees, volunteers, committees and boards, from and against any and all liability, loss, damages, claims, or actions (including costs and attorneys fees) for bodily injury and/or property damage, to the extent permissible by law.

This waiver agreement shall include indemnity against all costs (including without limitation, reasonable attorney's fees and court costs), expenses and liabilities incurred in or in connection with any such claim or proceeding brought thereon and in defense thereof.

I have read and fully understand this waiver and release. I voluntarily sign it and hereby give permission to GARDEN FARMS OF NEVADA/ GARDEN FARMS FOUNDATION for emergency transportation and/or treatment in the event of illness or injury. I hereby accept responsibility for the payment of any emergency transportation and/or treatment. I further certify that my child is in good physical condition, and has no medical or physical conditions that would restrict his/her participation in this activity or program.

Parent or Legal Guardian Signature _____

Address _____

Telephone # (_____) _____ **Date** _____

Minor's Name _____