Registration

Please complete a separate form for each child.	
Child's Name	
Child's Birthdate	
Allergies Age:	
Any Medical/Health Issues or Medication Needed	
Emergency Contact Information	
()	-
I agree that if my child is endangering him/herself, the l to sit out of the activity.	livestock, or others then he/she will be asked
I/we agree to obey all posted rules and warnings and fugiven by Sugar Magnolia Farm, Kristy Hayes, or the employees thereof	-
PHOTO RELEASE	
SUGAR MAGNOLIA FARM AND HAYES FAMILY hereby hereby the photograph publicly to promote their activities at SUGAR MAGNOLIA used in print publications, online publications, presentations, website no royalty, fee or other compensation shall become payable to me by	FARM. I understand that the images may be es, and social media. I also understand that
OR	
SUGAR MAGNOLIA FARM AND HAYES FAMILY does no photograph.	t have my permission to use my or my child's
Anything else I should know about your child:	
XDATE:	
SIGNATURE OF PARENT OR GUARDIAN	
DADENT OF CHAPDIAN PHONE NUMBER ()	