## The North of Eden Farm Visitor Waiver Agreement & Release of Liability Form

s a condition to visiting and entering onto property located at 3700 Stockyard Road, Eden, Maryland 21822 (hereinafter
referred to as "North of Eden Farm"), the signatory below executes and delivers this release and waiver. I fully
understand that by signing this agreement, I waive, release, and relinquish any and all rights to seek the recovery
of damages for any personal injury, property damage, or other cause of action, known or unknown, which may arise from my entry onto North of Eden Farm and activities associated therewith.
(please print), hereby sign this agreement on behalf of myself, my child, my
personal representatives, heirs and assigns.
Participating Child(ren)'s Name(s):

- I agree as a precondition to my participation in any event, walking path, yard, field, pen, building, animal interaction, pick your own, educational activity, entertainment activity (hereinafter referred to collectively as "The North of Eden Farm Experience") organized and/or conducted by North of Eden Farm and its staff, and in further consideration of North of Eden Farm allowing me to do so, to be strictly bound by the terms of this North of Eden Farm Visitor Waiver, Agreement & Release of Liability Form (hereinafter referred to collectively as "This Agreement").
  - 1. I acknowledge that interactions with animals, including bees, goats and dogs and any other animal-related event, involve inherent risks that may cause serious injury, illness, and possibly death to participants.
  - 2. I fully understand that walking in the goat enclosure could be dangerous. I am responsible for following all verbal and written instructions and enforcing these messages with any participating children listed on this form.
  - 3. I recognize the dangers of participating in farm activities (including, but not limited to, walking paths, tours, interaction with animals, and pick-your-owns), including uneven ground, insect and animal bites/stings, and utilizing sharp objects (scissors, pruners and other tools used to cut stems/stalks). I understand North of Eden Farm is not responsible for any allergic reactions that may occur while on the property.
  - 4. I fully understand the risks and dangers associated with my experience and the experience of any guest or child accompanying me (or my personal representative, heirs, or assigns) participation in The North of Eden Farm Experience, and I accept those risks and dangers unconditionally and know them to be inherently dangerous.
  - 5. I hereby waive, release, and relinquish any and all claims which I may have against North of Eden Farm and/or its business owner, staff, vendors, and/or land owners and release North of Eden Farm business owner, volunteers, subcontractors, vendors and/or land owners from all liability for injury, death, property damage, or any other loss sustained by me or my child (or any child accompanying me while at North of Eden Farm) as a result of my/their participation in the Event, due to any cause whatsoever including, without limitation, negligence on the part of North of Eden Farm or its staff members. I further release North of Eden Farm from any and all claims seeking to recover legal fees and/or costs of any type or nature.
  - 6. I understand, acknowledge, and agree this release applies whether North of Eden Farm is at fault or not and it releases not only the property owners but staff of North of Eden Farm. I understand and acknowledge that North of Eden Farm, in securing the execution of this release and waiver, is relying upon my actions herewith as free and voluntary actions and my signature is not subject to any promise or inducement made to me by anyone.
  - 7. I consent to and authorize the use and reproduction by North of Eden Farm of any photographs and any other audio/visual materials taken of me for marketing material, educational activities, exhibitions, or other use.

I have read and understand this Agreement, I understand this document contains a promise not to sue North of Eden Farm or its Staff Members and release and indemnify same for all claims.

Visitor/Participant Signature	_
Date Submitted	
Visitor Phone Number	
Address	 