



## Visitor Waiver and Release of Liability Form

Date Submitted: \_\_\_\_\_ Time: \_\_\_\_\_

Visitor Name: \_\_\_\_\_

Visitor Phone Number: \_\_\_\_\_

Visitor Email Address: \_\_\_\_\_

This form must be completed and signed prior to the event starting:

\_\_\_\_\_

Event Name

\_\_\_\_\_

Event Date

\_\_\_\_\_

Event Time

I wish to visit and /or participate in activities sponsored by Norwood Centennial Farms LLC at 1498 Barnard Rd. Charlevoix, Mi 49720. I understand that I do so at my own risk. In exchange for being permitted to visit and/or participate in activities, I hereby release and waive Norwood Centennial Farms LLC, Douglas Warner, and Sarah Roy or any entities affiliated with the foregoing from liability for any and all loss, damage, injuries, claims, demands, lawsuits, expenses and any other liability of any kind, of or to me or any other person, directly or indirectly arising out of or in connection with my visit or participation in any activity.

I further agree to hold harmless, indemnify and reimburse the Released Parties from and for any sums, costs or expenses incurred by any of the Released Parties or paid by them to any person (including me or my insurers) in connection with any accident, loss, damage, or injury sustained by me or others in connection with my attendance or participation in the above-described activity. This means that I will reimburse the Released Parties if anyone makes a claim against them based on damages or injuries I may suffer.

\_\_\_\_\_

Adult Visitor/Participant Name (Please Print)

\_\_\_\_\_

Adult Visitor/Participant Signature

\_\_\_\_\_

Guardian Name if Participant is under 18  
(Please Print)

\_\_\_\_\_

Guardian Signature