Twelve Acre Farm

1585 Harbourton-Rocktown Rd Lambertville, NJ 08530 732-616-0529

Farm Visit Form

Check the date(s) you will attend: 2-3pm on	☐ April 13	☐ May 11	☐ June 8
Family/Group Name:		Date:	_
Participants (list first names):			
Address:			
Phone:E	mail:		
Emergency Contact:			
Phone:			
MEDICAL RELEASE: □ Participants are in good participate in all activities without restriction.			
LIABILITY RELEASE : Under New Jersey Law, an or the death of a participant in equine activities activities, pursuant to P.L. 1997, c287 (C5:15-1	es resulting fro		
I acknowledge the inherent risks in riding and However, I feel that the possible benefits to penereby, intending to be legally bound, for mys administrators, waive and release forever all coboard of directors, advisory board, instructors and representatives of any kind for any and al actions, law suits, and/or losses participant/gu Acre Farm programs.	articipant are g self, my heirs, a claims for dama s, therapists, aid I injuries, dama	reater than the ssigns, executo ages against Tw des, volunteers ages, claims, de	e risks assumed. I ors and/or velve Acre Farm, its s, employees, agents, emands, causes of
Participant/Guardian Signature	_ D	ate	
PHOTO & PUBLICITY RELEASE (Optional): I hereby consent to and authorize Twelve Acre photographs and any other audiovisual mater material, educational activities, exhibitions or	e Farm to use a ials taken of pa	nd/or reprodu articipant for pr	omotional printed
Participant/Guardian Signature	D	ate	