WALTHAM FIELDS COMMUNITY FARM

AGE 18+ PRINT NAME OF PARTICIPANT

VOLUNTEER WAIVER FORM

Please read this waiver of liability and sign below. Each individual adult volunteer must sign a waiver and provide us with emergency contact information. Youth aged 17 and under must get adult signature before they can volunteer.



I realize that injuries can occur during participation in volunteering and programs. I agree to follow the instructions of the farm staff. I AGREE TO WAIVE, RELEASE, AND HOLD HARMLESS Community Farms Outreach, Inc./Waltham Fields Community Farm, their board of directors, employees, instructors, volunteers, or assignees from any claim arising out of injury to my children or myself. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for me or my child/children. I give Waltham Fields Community Farm permission to publish in print, electronic, or video format the likeness or image of myself and/or my child, for the general promotion of WFCF and its programs. If I do not give permission to publish the likeness or image of myself and/or my child, I accept the responsibility to attach to this form a signed and dated letter attesting to this fact.

SIGNATURE OF PARTICIPANT:	
NOTE: If any participant is AGE 17 OR UNDER, THEY CAN NOT VOLUNTEER without a parent of guardian signature:	
I give permission for the following minor(s)	to volunteer at Waltham Fields:
NAME(S) of minor participants volunteering today:	
PRINT name of parent/guardian:	
SIGNATURE of parent/guardian:	·
ADDRESS:	
Please add my email to Waltham Field's email list: _	YesMaybe later ☺
Please add my snail mail to Waltham Field's mailing	list:Absolutely!Not now, thanks
Please update my contact information that you alre	ady have with the above info:Yes
EMERGENCY CONTACT INFORMATION:	
NAME:	PHONE:
Today's date:	

THANK YOU FOR YOUR COMMUNITY SERVICE AT WALTHAM FIELDS COMMUNITY FARM!