



8405 Kearny Road Downers Grove, IL 60516

(630) 269 - 4345

**HGFF - Liability Release and Hold Harmless Agreement for Child**

I \_\_\_\_\_, as the Parent / Guardian of \_\_\_\_\_ - understand the potential dangers and inherent risks including personal injury, loss of property and other dangers that may result from their participation in various farm activities; including but not limited to the interaction with horses, ponies, donkeys, llamas, goats, sheep, chickens, ducks, bees, amphibians, reptiles, and fish etc., as well as participation in other activities at Honey Bee Gardens Family Farm LLC.

Understanding that there are inherent risks possible to my child, I hereby release and agree to hold harmless, Honey Bee Gardens Family Farm LLC., its managers, officers, directors, shareholders, partners, employees, volunteers, and anyone else directly or indirectly connected to Honey Bee Gardens Family Farm LLC., from any liability whatsoever, resulting in their injury, damage of any nature; including death, incidental to their participation in any and all activities associated with HGFF.

I affirm with my signature, dated below - that I enter this Liability Release and Hold Harmless Agreement voluntarily and intentionally.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Student Information Sheet - Please Print**

Program signing up for: \_\_\_\_\_

Student's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Child's Age \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Parent's Name: \_\_\_\_\_

PH#: \_\_\_\_\_ PH#: \_\_\_\_\_

Parent's Email: \_\_\_\_\_ Parent's Email: \_\_\_\_\_

Emergency Contact if we can't reach you: \_\_\_\_\_

Phone #: \_\_\_\_\_

Medical Information / Allergies: \_\_\_\_\_

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