**Summer Camp RELEASE FORM**

Camper: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_

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

City, State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Parent or Legal Guardian Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Emergency #: \_\_\_\_\_\_\_\_\_\_\_\_\_ School Attending: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade:\_\_\_\_\_\_\_\_\_\_

CONSENT AND LIABILITY RELEASE I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby

request that the camper named above be accepted into Danny’s Farm Summer Camp operated by Danny’s Farm. I acknowledge Danny’s Farm Personnel have fully explained to me the scope of Summer Camp, including the potential for injury which can occur from petting farm activities, caring for animals or being involved in activities that include farm animals. Because of the potential benefits of the Summer Camp, I hereby waive any claim which I or the camper may have against Danny’s Farm, officers, employees, volunteer, or contract personnel arising out of any injury which the camper may sustain while involved in the Danny’s Farm Summer Camp, unless caused by the willful misconduct or gross negligence of Danny’s Farm, its employees, officers, volunteers, or contract personnel. I acknowledge the risks and potential risks of animal-related activities and activities in and around a facility where horses are kept and farm machinery operated. However, I feel that the possible benefits to me/my son/my daughter/my ward outweigh the risk assumed. Intending legally to bind myself, my heirs, and assigns, executors or administrators, I hereby waive and release forever all claims for loss or damages of any kind against Danny’s Farm, Special Spirit, Moonshadow Ranch, Eva Lund and its Board of Directors, instructors, therapists, aids, volunteers, contract personnel and employees for any and all injuries and losses that I/my son/my daughter/my ward may sustain while participating in the Summer Camp. This release includes without limitation the risk of negligent instruction and supervision. I engage in activities at Danny’s Farm. voluntarily with knowledge of the risks and I assume all risks of injury, death, and property damage that may result. I agree to bear any loss myself. I acknowledge that Danny’s Farm and the property owners are materially relying on this waiver and assumption of risk in allowing me/my son/my daughter/my ward to participate in activities at Danny’s Farm.

 **I have read this release.**

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Signature of Parent/Guardian Date