



NON-MEMBER PARTICIPATION WAIVER

As a participant of activities held at the Ocean View Farms, Inc. (OVF) community garden, I understand that there are risks and hazards inherent to gardening present on the grounds of OVF. I acknowledge that Ocean View Farms, Inc. does not maintain accident insurance on my behalf. Therefore, I have or shall obtain, at my own expense, adequate insurance to cover my personal needs in the event of injury to myself while at OVF.

I understand that the individuals who serve as officers and/or directors are unpaid volunteers and I understand that persons in this capacity are no more or less responsible for acts of omission or commission than any other Ocean View Farms, Inc. member.

In consideration of being given permission to participate in OVF community gardening activities and use of OVF facilities, and for other good and valuable consideration, the undersigned individual and his/her personal representatives, heirs, executors, administrators, agents and assigns collectively hereby agree to assume full responsibility for any and all damages, claims and liability for injury or death and for damage or injury to any property (including, without limitation, any loss or theft of any personal property or loss) which occur at OVF.

I further agree, on my own behalf and on behalf of any family members or guests to indemnify and hold harmless, release and forever discharge OVF, and each of its members, from any and all damages, claims, liability and costs for or from injury or death to any person or injury to any property which may arise by reason of the use of OVF facilities and/or participation in the activities at OVF. whether arising out of my negligence or other acts or omissions of me or my family or guests.

Print name: _____ Signature: _____ Date: _____

Print name: _____ Signature: _____ Date: _____
(Parent, or legal guardian, if under age eighteen)

Print name: _____ Signature: _____ Date: _____

Print name: _____ Signature: _____ Date: _____

Print name: _____ Signature: _____ Date: _____