Participant Release of Liability Assumption of Risk Agreement ***Read before Signing***

Organization	n Name: The Dairy Barn Arts C	Center			
Participant N	Name:				
	on of being allowed to participate in nent, I the undersigned, acknowledg			events and activities, and	
1.) There invol	e is a risk of injury from the activitie	es involved	in this program due to	the tools and methods	
2.) I KN even	2.) I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS , both known and unknown, even if arising from the negligence of the Releasees or other and assume all responsibility for my participation.				
3.) I will signif	3.) I willingly agree to comply with the terms and conditions for participation. If I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and				
bring such to the attention of the nearest official immediately. 4.) I, for myself HERBY RELEASE, INDEMNIFY, AND HOLD HARMLESS THE DAIRY BARN ARTS CENTER, employees, and other participants, from any and all claims, demands, losses, and liability arising out of or related to any INJURY, DISABILITY OR DEATH I MAY SUFFER, OR LOSS OR DAMAGE TO PERSON OR PROPERTY, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law. I HAVE READ THIS RELEASE OF LIABILITY AND ASSUPTION OF RISK, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVENUP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.					
	Participant Signature]	I am over 18	Date	
TIME OR IT This is to certain agree to and next of liability incide	ENTS/GURDIANS OF PART REGISTRATION) rtify that I, as parent/guardian withis/her release as provided above in, I release and agree to indemodents to my minor child's involve if arising from the negligence of	ith legal re we of all th nify and he ement or p	sponsibilities for this e Releasees, and, for r old harmless the Relea participation in these p	participant, do consent myself, my heirs, assigns asees from any and all programs as provided	
	Parent/Guardian Signature		Date	Emergency Phone Number	