



Attendant's Full Name:

I understand that I am freely choosing to conduct activities on a farm and such activities engaged while on the premises of Honey Hollow Farm may be hazardous due the nature of the activities and/or the location on a farm. I expressly and specifically assume the risk of injury or harm in these activities or presence on the farm.

I (and my family, heirs, and personal representatives) willingly and knowingly release the Honey Hollow Farm and its officers, owners, employees and agents from any and all liability for any personal injury or damage to property relating to my participation. I (and my family, heirs, and personal representatives) agree to assume all of the risks and responsibilities of my participation. I understand that I am solely responsible for any hospital or other costs arising out of any personal injury or property damage relating to my participation on Honey Hollow Farm.

I acknowledge the contagious nature of the Coronavirus/COVID-19. I further acknowledge that Layla Broumand Phillips, Honey Hollow Farm, Honey Hollow Farm LLC, and any affiliated individuals or entities (hereinafter "Honey Hollow") has put in place preventative measures to reduce the spread of the Coronavirus/COVID 19.

- Encouraging use of face masks when inside
- Enhanced cleaning of premises
- Well-circulated openings

I further acknowledge that Honey Hollow cannot guarantee that I will not become infected with the Coronavirus/COVID-19. I understand that the risk of becoming exposed to and/or infected by the Coronavirus/ COVID-19 may result from my participation and/or presence at Honey Hollow. I voluntarily seek services provided by Honey Hollow and acknowledge my risk of to exposure to the Coronavirus/COVID-19. I acknowledge that I must comply with all set procedures to reduce the spread while attending classes at Honey Hollow Farm.

I attest that, by attending class myself:

- I am not experiencing any symptom of illness such as cough, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell.
- I have not traveled internationally within the last 14 days.
- I have not traveled to a highly impacted area within the United States of America in the last 14 days.
- I do not believe we have been exposed to someone with a suspected and/or confirmed case of the Coronavirus/COVID-19.
- I have not been diagnosed with Coronavirus/COVID-19.

- I am following all CDC recommended guidelines as much as possible and limiting my/our exposure to the Coronavirus/COVID-19.

I acknowledge and fully assume the risk of illness or death related to COVID-19 arising from my being on the premises and participating in the Activities and hereby RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE (on behalf of myself and any minor children for whom I have the capacity contract) Honey Hollow from any liability related to COVID-19 which might occur as a result my being on the premises and participating in the Activities. This liability waiver and release extends to the farm together with all owners and participants in it. IN SIGNING THIS AGREEMENT, I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing Wavier of Liability and Hold Harmless Agreement, understand it and sign it voluntarily as my own free act and deed; no oral representations, statements, or inducements, apart from the foregoing written agreement, have been made; I am at least eighteen (18) years of age and fully competent; and I execute this Agreement for full, adequate and complete consideration fully intending to be bound by same.

Signature _____
Date _____
attendant _____

Attendant's Information:

First Name _____ Last
Name _____
Known Allergies (food and non food related)

