

# Winterberry Farm, LLC

## 2008 Summer Camp Registration Form

10 Winterberry Road • Brookline, NH 03033 • (603) 672 - 5602

Child's Name: \_\_\_\_\_ Nickname: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: M/F

Home address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent or Guardian: (mother) \_\_\_\_\_ (father) \_\_\_\_\_

Phone: (H) (\_\_\_\_) \_\_\_\_\_ (W) (\_\_\_\_) \_\_\_\_\_ (Cell) (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

Physicians Name \_\_\_\_\_ (Phone) (\_\_\_\_) \_\_\_\_\_

Emergency Contact: #1 (Name) \_\_\_\_\_ (Phone) (\_\_\_\_) \_\_\_\_\_

Emergency Contact: #2 (Name) \_\_\_\_\_ (Phone) (\_\_\_\_) \_\_\_\_\_

Allergies, Medications, Medical Conditions, and other Comments (previous experiences, concerns, etc.): \_\_\_\_\_

Describe child's personality (likes, dislikes, fears etc.) \_\_\_\_\_

Swimming Ability: (please check one) Advanced  Intermediate  Beginner  Unable

Week(s): Jul 7-11  Jul 14-18  Jul 21-25  Jul 28-Aug 1

**Please note:** Winterberry Farm, LLC does not have a doctor, nurse or other health care provider on-site. Therefore Winterberry Farm does not store or dispense any medications to campers. Should a child require medication Winterberry Farm, LLC requests that the Child's parent or guardian provide the medication directly to the child at the farm. Also please understand that we reserve the right to terminate a child's participation in camp do to disciplinary or behavioral problems.

### RELEASE AND WAIVER OF LIABILITY

(please read carefully)

In consideration for the above named child(ren) being permitted to participate in the Winterberry Farm Camp(s), the undersigned, being at least eighteen years of age and being the parent or legal guardian of the child(ren), agrees to the terms of this document on behalf of her/himself and on behalf of the Child.

I understand that contact with agriculture animals and riding of ponies (horses) and presence at a farm are inherently dangerous activities that involve the risk of personal injury, death and/or property damage. I understand that the category of risks include, but are not limited to: unpredictable conduct by animals; variations in weather and terrain; and contact with electrical fences, and farm stable equipment and machinery. I agree to assume all risks of injury, death and property damage that may result from participation in this summer camp, which relate in any way to the use of farm equipment, or from any other activity at Winterberry Farm, LLC.

To the fullest extent allowed by law, I agree to release, hold harmless, indemnify and defend Winterberry Farm, LLC their directors, officers, affiliates, managers, employees, members, independent contractors, representatives, agents and the owners and lessors of the real property comprising Winterberry Farm, LLC (hereinafter referred to collectively as "RELEASEES") from and against any and all claims, lawsuits, liens, attorney's fees, or costs made by me or on behalf of the child(ren) for personal injury, death or property damage resulting from the negligence of the RELEASEES or any other person or cause, or which may in any way arise out of the child's(ren) participation in this day camp, the child's use of farm equipment, or is in any way related to activities at Winterberry Farm, LLC. I expressly understand that the RELEASEES are not responsible for their failure to use reasonable care in any way.

I further agree to release, hold harmless, indemnify and defend the RELEASEES from and against any and all claims, lawsuits, liens, attorney's fees, or costs for personal injury, death or property damage that the Child may cause to other persons or property while participating in this day camp, using farm equipment, or while present at Winterberry Farm, LLC.

I authorize the RELEASEES to administer first - aid to the child as they deem necessary. I authorize the Child's transportation to medical facility, at my expense, if deemed the necessary by the RELEASEES. He/she may participate in all camp activities and photographs of same may be used for camp publicity.

I agree that this Release and Waiver of Liability is governed by the applicable laws of New Hampshire. I further agree that any action involving parties or issues relating to or arising out of this Release and Waiver of Liability must be instituted and prosecuted in the courts located in New Hampshire.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_