CAC Beardsley Community Farm P.O. Box 51650 Knoxville, TN 37950-1650 Farm: 865-546-8446 Office: 546-3500 Email: beardsleyfarm@gmail.com www.beardsleyfarm.org

Volunteer Liability Release and Information Form

Personal Information (Ple Name	Dhone	Email	
Address			
	One)18 or Older		
Note: Persons under the age o	of 18 must have a parent or legal gu	artian sign below.	
C		larutan sign below.	
Emergency Contact Person Name	on		
Emergency Contact Perso	on Relationsl	ip	
Emergency Contact Personame	on Relationsl	iip	

Name (print) Date:	
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Volunteer Responsibility Statement (Please read and sign below)

As a volunteer in this community project I acknowledge that:

1. There is a risk of bodily injury, and loss of or damage to my personal property.

- 2. I knowingly and freely assume all risk, and I will act to avoid danger to others and myself.
- 3. I hereby release and hold harmless Beardsley Community Farm, Knoxville-Knox County Community Action Committee, CAC AmeriCorps, Water Quality Forum, Ijams Nature Center, event sponsors, officials, agents, members and/or employees, with respect to any and all liability for claims, personal injuries, property damage, and/or loss of life or property resulting from, or in any way connected with, or alleged to have arisen from, the performance of this activity.
- 4. I, the undersigned, guarantee that I, or the minor child for whom I am the parent or guardian am (is) in good physical condition and am (is) fully physically capable of participating in this project.
- 5. If the volunteer listed above is a minor child, I, the undersigned, as parent or guardian agree to the child's participation under these conditions, and take full responsibility for this child's actions.
- 6. I understand that Beardsley Community Farm is an alcohol and drug-free site, and also prohibits the use of tobacco products.

Volunteer Safety Agreement

I _____, understand and agree to the Safety Regulations at Beardsley Community Farm. I understand that I should:

- 1. Stay hydrated.
- 2. Wear gloves, closed-toed shoes and sunscreen.
- 3. Beware of poison ivy, bees and the sun.
- 4. Lift with my legs and be aware of the proper use of tools surrounding me.

Volunteer (or Parent/Guardian) Signature:_____ Date: