

**Healing and Hope for Children with Disabilities**

**Wheatland Farm Liability Release Form**

Participant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth:\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Special Information: Please note anything below that applies including medical conditions, allergies and/or precautions or limitations to participation:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Liability Release:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (participant’s name) would like to participate in \_\_\_\_\_\_\_\_\_\_\_\_\_\_ offered by Faith and Family Foundation & Wheatland Farm. I acknowledge the risks and potential risks for working at a farm, around farm animals and around horses. I feel that the possible benefits to (me/my child/my ward) are greater than the risks assumed. I hereby, intending to be legally bound, for myself, my heirs and assignees, executors and administrators, waive and release forever all claims for damages against FAith and FAmily Foundation & Wheatland Farm, its directors, officers, agents, employees, instructors, therapists, aides and/or volunteers, resulting from any and all injuries and/or losses (I/my child/my ward) may sustain while participating in the activities offered by Faith and Family Foundation & Wheatland Farm. It is expressly agreed by participant and any parent or guardian whose signature appears on this document that this agreement shall be governed and construed as being sufficient to satisfy the assumption of risk and waiver requirements necessary to relieve equine activity sponsors and equine professionals from liability under the Virginia Equine Liability Act (Virginia Code Section 3.2-6200 et seq.), and Faith and Family Foundation & Wheatland Farm, and all of its agents, directors, officers, shareholders, employees, volunteers, consultants, partners, successor and assigns are covered by the provisions of the Virginia Equine Liability Act (Virginia Code Section 3.2-6200 et seq).

Date: Signature: