## ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM

| I,activit | , voluntarily assume all risks associated with participating in any and all ties related to the Freeland and Sabrina Garden Experience.   |
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|           | ify that:   |
| •         | I am able to walk unassisted through all parts of the tour, which includes grass, gravel, and asphalt paths.  |
| •         | I have no health-related issues that would prevent my participation in this activity.   |
| •         | I understand that risks may include, but are not limited to, those caused by terrain, facilities, temperature, weather, participant conditions, hydration, and the actions of others, including participants, volunteers, and event organizers.   |
| •         | I have not been advised against participation by a qualified medical professional.  |
| •         | I consent to be responsible for any medical treatment in the event of injury, accident, or illness during this activity.  |
|           | nsideration of my participation in this activity, I hereby take the following actions for myself, my executor<br>nistrators, heirs, next of kin, successors, and assigns:   |
| and S     | WAIVE, RELEASE, AND DISCHARGE from any and all liability the following entities or persons: Freeland abrina Tanner, Rebecca Sweet, Jim Peterson, Garden Design, and/or their directors, officers, employees, teers, representatives, agents, and event holders, sponsors, and volunteers. |
| from a    | AGREE TO INDEMNIFY, HOLD HARMLESS, AND NOT SUE the entities or persons mentioned in Section A any and all liabilities or claims arising from my participation in this activity, whether caused by the negligence o released or otherwise.   |
|           | RTIFY THAT I HAVE READ AND FULLY UNDERSTAND THIS DOCUMENT. I AM AWARE THAT IS A RELEASE OF LIABILITY, AND I SIGN IT OF MY OWN FREE WILL.  |
| Partic    | ipant's Signature   |
| Partic    | ipant's Name  |
| Date      |   |
|           |   |