

**Minor Release and Waiver of Liability  
Fertile Ground Gathering**

I, \_\_\_\_\_, do hereby state that I wish my child(ren) participate in activities sponsored by ShadowGrove Ministries, Inc. (SGSM, Inc.) at the Fertile Ground Gathering. I understand that SGSM, Inc. makes no representations or claims as to the condition or safety of the land, structures or surroundings of the property on which the festival is held, whether or not owned, leased operated or maintained by SGSM, Inc.

I understand that all activities are voluntary and that my child(ren) does not have to participate unless I choose to allow him/her to do so. I understand that by my consent to allow my child(ren) to participate, I voluntarily accept and assume the risk of injury to my child(ren) or damage to my child(ren)'s property.

I understand that SGSM, Inc. does not provide any insurance coverage for my child(ren)'s property. I understand that I am responsible for my child(ren)'s safety, his/her health care needs, and the protection of his/her property.

In exchange for allowing my child(ren) to participate in the activities of the festival, I agree to release from liability, agree to indemnify and hold harmless SGSM, Inc. and any SGSM, Inc. agent, acting within the scope of their duties, for any injuries that may occur to my child(ren) or my child(ren)'s property.

This release shall also certify that I am the parent or legal guardian of this child(ren). This release shall be binding on myself, successors in interest, or any person or persons who would attempt to sue on my behalf.

I UNDERSTAND THAT THIS IS A LEGAL DOCUMENT. I HAVE READ, UNDERSTAND, AND AGREE WITH ALL OF THE STATEMENTS AND TERMS IN THIS DOCUMENT. I UNDERSTAND THAT THIS DOCUMENT IS COMPLETE UNTO ITSELF AND THAT ANY ORAL PROMISES OR REPRESENTATIONS MADE TO ME CONCERNING THIS DOCUMENT AND/OR THE TERMS CONTAINED HEREIN ARE NOT BINDING UPON SGSM, INC. OR THE AGENTS OF SGSM, INC. I EXECUTE THIS DOCUMENT VOLUNTARILY AND WITH FULL KNOWLEDGE OF ALL THE MEANINGS CONTAINED HEREIN.

CHILD'S LEGAL NAME (please print) \_\_\_\_\_

CHILD'S LEGAL NAME (please print) \_\_\_\_\_

CHILD'S LEGAL NAME (please print)

PARENT/GUARDIAN LEGAL NAME (please print) \_\_\_\_\_

PARENT/GUARDIAN LEGAL NAME (signature) \_\_\_\_\_

DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

In case of emergency situations, please detail any special needs, food allergies, or medical condition (asthma, diabetes, etc.), which may require immediate action below: