

Sand Pine Christmas Tree Harvest Liability Waiver

PARTICIPANT LIABILITY WAIVER AND RELEASE

I, the undersigned, in consideration of being allowed to participate in the Sand Pine Christmas Tree Harvest Event , acknowledge, agree, and represent that:

1. Acknowledgment of Risk:

I understand and acknowledge that participation in this Event involves outdoor activities, including but not limited to harvesting Sand Pine Christmas trees using hand tools, and that these activities carry inherent risks. I further understand that risks include, but are not limited to, minor injuries and more serious injuries resulting from tool use, physical exertion, environmental factors, or accidents.

2. Assumption of Risk:

I hereby voluntarily assume all risks associated with my participation in this Event, including those that may be caused by my own actions, the actions of others, environmental conditions, or the conditions of the property on which the event takes place.

3. Use of Hand Tools Only:

I acknowledge that only hand tools (e.g., saws, pruners) are permitted for use during the event and that the use of any power tools or machinery is strictly prohibited. I agree to use these tools responsibly and safely, following all instructions and guidelines provided by the Event Organizer.

4. Safety Compliance:

I agree to adhere to all safety guidelines, rules, and directions provided by the event organizer, including but not limited to proper tool handling, wearing appropriate clothing, and ensuring the safety of myself and those around me. I agree to notify event staff immediately if I observe any unsafe behavior or hazardous conditions during the event.

5. Release and Waiver of Liability:

I, on behalf of myself, my heirs, assigns, personal representatives, and next of kin, hereby release, waive, discharge, and hold harmless the event organizer, its employees, volunteers, agents, and any property owners of the event location from all claims, liabilities, losses, or damages arising out of or in connection with my participation in the event, including any injury or damage caused by the negligence of any of the aforementioned parties.

6. Medical Treatment:

I consent to receive medical treatment if necessary during the event, and I agree that I am responsible for any medical or other costs associated with my treatment.

7. Photo and Video Release:

Participant's Name: _____

I grant the Event Organizer permission to use photographs or videos taken during the Event for promotional purposes, without compensation.

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD, AND AGREE TO THE TERMS OF THIS LIABILITY WAIVER AND RELEASE. I FURTHER ACKNOWLEDGE THAT I AM VOLUNTARILY PARTICIPATING IN THIS EVENT WITH FULL KNOWLEDGE OF THE RISKS INVOLVED.

Participant's Signature:		
ate:		
arent/Guardian Signature (if under 18):		