

THE URBAN CHICKENS - MINOR 2017
MEDICAL AUTHORIZATION, RELEASE AND WAIVER OF LIABILITY

TO BE COMPLETED BY PARTICIPANT

This agreement is made this _____ day of _____, 2017 between Inspire Joy Inc Doing Business As The Urban Chickens and _____ (“Participant”).

1. Subject. Participant recognizes and expressly agrees that participating in any adventure, sport or activity associated with the out-of-doors is an inherently dangerous activity and carries with it a reasonable degree of risk. Further, Participant recognizes that certain safety precautions must be followed, yet even strict adherence to those procedures does not guarantee nor does The Urban Chickens guarantee Participant's safety.

2. Waiver and Release from Liability. Participant understands that The Urban Chickens assumes no responsibility for injuries or illnesses that Participant may sustain,

- a) as a result of Participant's physical condition,
- b) resulting from Participant's participation in the activity,
- c) as a result of another participant's or third person's actions, or
- d) as a result of participant's use of The Urban Chickens' facilities, property, outdoor areas, and/or equipment and animals in connection with this activity.

In consideration of being allowed to participate in The Urban Chickens' programs, the Participant releases and agrees to hold harmless, defend and indemnify Inspire Joy Inc Doing Business As The Urban Chickens and its directors, officers, employees, staff, agents, and instructors from and against any and all claims for personal injury (including loss of life) and all other losses or damages (except those caused entirely by the gross negligence or intentional conduct of The Urban Chickens) that the Participant may suffer as a result of his or her participation and/or enrollment in The Urban Chickens' program activities.

3. Medical Consent. Participant grants permission to The Urban Chickens and its employees, staff, and agents to take the Participant to a licensed physician for medical treatment, emergency surgery, or hospitalization if Participant becomes ill, sustains an injury, or otherwise requires medical treatment or attention and The Urban Chickens is unable to contact the Emergency Contact listed by Participant. The Participant gives consent to any licensed physician to administer drugs or medicine or to perform such medical procedures as that physician determines necessary for the relief of pain and to preserve the Participant's life or health. Participant further authorizes The Urban Chickens to give first aid, CPR or other treatment by a qualified staff member to Participant. Participant also authorizes transport in an emergency vehicle.

4. Property Loss. Participant understands and agrees that The Urban Chickens is not responsible for personal property that is lost, damaged, or stolen in connection with this activity.

5. Binding Effect. This Agreement shall be binding upon Participant, his or her family, his or her heirs, assigns, estate, successors, and legal representatives.

6. Entire Agreement. This Agreement represents the entire agreement between the parties. This Agreement shall not be modified or amended except by an agreement in writing signed by both parties.

7. Acceptance. If any portions of this waiver and release are held to be invalid, Participant agrees the remaining terms shall continue to be in full legal force and effect. Participant understands and agrees that this Waiver and Release is binding upon him or her and his or her family, heirs, assigns, estates, successors, and legal representatives.

PLEASE READ CAREFULLY. THIS DOCUMENT CONTAINS A RELEASE AND WAIVER OF LIABILITY.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN ME AND INSPIRE JOY INC DOING BUSINESS AS THE URBAN CHICKENS, AND I HAVE SIGNED THIS OF MY OWN FREE WILL. I ALSO AGREE TO ABIDE BY ALL RULES OF ENROLLMENT.

I, as parent or guardian of _____, give my permission for him/her to participate in The Urban Chickens programs and in consideration of his/her participation, agree individually and on behalf of him/her to the terms of the above agreement and release of liability.

Inspire Joy Inc Doing Business As The Urban Chickens also has my permission to secure emergency medical attention if I cannot be reached immediately. Parent/Guardian Signature:

Parent/Guardian Signature

Date