

2017 Lil Farmers' Club

Registration Form

Child's Name First: _____ Last: _____

Parent or legal guardian: _____

Street Address: _____

City, State, Zip _____

Phone number: _____ Emergency number: _____

I give permission for my child to participate in the Lil Farmers' Club at the Ohio Valley Farmers' Market. In the event of any accidents or losses that may arise from participation in the programs. I agree to hold harmless the Ohio Valley Farmers' Market and any of its staff or volunteers. I will remain on-site (or have another person who is responsible for my child remain on-site) while my child attends the gardening program.

In addition, please complete the following photo release. If you prefer we not use your child's images in our promotional materials, please indicate so below.

PHOTO RELEASE

I, _____, Parent/Guardian of _____ hereby authorize and consent to the use of his/her visual image by the Ohio Valley Farmers' Market for appropriate purposes, including but not limited to: still photography, videotape, electronic and print publications and websites. I give this consent with no claim for payment.

_____ Please do not publish my child's images.

Signature _____ Date _____