



## Liability Release to Other Agency Form Urban Roots School To Farm Initiative

Dates of program: \_\_\_\_\_ to \_\_\_\_\_ School/Agency: \_\_\_\_\_

### Description of Activities

Staff and/or Interns from Urban Roots will be facilitating educational activities at their farm in East Austin. Your group will be engaged in age-appropriate farm activities and discussions on the topics of healthy eating and nutrition, sustainable agriculture, science based curriculum and community hunger. Urban Roots employees are committed to the safety of your child and will take every reasonable precaution to keep them safe.

### Release of Liability

I understand that Urban Roots employees take every reasonable precaution to keep youth participants safe. However, due to the nature of farm work, unforeseen injuries may occur. \_\_\_\_\_ (agency name) agrees to hold harmless Urban Roots employees, farm interns, board members, and other volunteers of any injuries that any youth participant may incur on or offsite in conjunction with field trip activities. \_\_\_\_\_ (agency name) currently has in our possession signed parent permission forms releasing our youth participants from liability from our activities and we will provide these to Urban Roots on request in the event that they are needed.

**My signature below indicates that I have read, understand, and agree to the information above:**

\_\_\_\_\_  
Program Director/Responsible Party Name (print)

\_\_\_\_\_  
Program Director/Responsible Party Signature Date

### Youth Participants Attending Urban Roots School to Farm Program Covered by this Form:

	First Name	Last Name		First Name	Last Name
1			14		
2			15		
3			16		
4			17		
5			18		
6			19		
7			20		
8			21		
9			22		
10			23		
11			24		
12			25		
13					

