



THE ACADIA COMMUNITY FARM (ACF) VISITOR AND VOLUNTEER AGREEMENT

The Acadia Community Farm Visitor and Volunteer Agreement has been developed to ensure healthy, safe, and enjoyable working conditions for the people involved in the operations and programs of the Acadia Farm, as well as the protection of the environment, equipment, and food systems. Your information is only for use by the Acadia Farm and will be kept private.

INFORMATION

Name: _____

Address: _____

Phone Number _____ Email _____

Are you over 18? (please circle answer) YES/ NO If not, what is your age? _____ (under 12 must be accompanied by an adult)

EMERGENCIES: In the case of an emergency, please list an emergency contact:

Name _____ Relationship: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Address: _____

ALLERGIES AND MEDICAL CONDITIONS

Please list any allergies, medical conditions, or medication(s) we should be aware of in case of emergency:

BEHAVIOUR

All gardeners, volunteers and visitors must adhere to the health and safety policy and other relevant campus policies. Those involved with the Acadia Farm are also expected to behave in a respectful, professional, and positive manner.

ASSUMPTION OF RISK

By signing below, I understand that outdoor activity can be hazardous, and use of the farm tools and related equipment involve a risk of injury to any and all parts of my body. I hereby agree to freely and expressly assume and accept all risks, dangers and hazards, and the possibility of personal injury, death, property damage and loss resulting therefrom. I understand that protective equipment such as gloves and boots are recommended, but they do not eliminate the risk and may not reduce the risk of injury in the event of an accident.

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT

In consideration of participation in farm activities, I agree as follows:

TO WAIVE ANY AND ALL CLAIMS that I have or may in the future have against ACADIA UNIVERSITY, its directors, officers, employees, volunteers, agents, representatives, successors and assigns (hereinafter collectively referred to as “THE RELEASEES”), and TO RELEASE THE RELEASEES jointly and severally, of and from any and all liability for any losses, damages, expenses and claims arising out of or in connection with injury (including death) or damage to property that I may suffer, or that my next of kin may suffer as a result of my participation in the Acadia Farm program due to any cause whatsoever INCLUDING NEGLIGENCE, BREACH OF CONTRACT, OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE.

TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES from any and all liability for any loss, expenses, damages, demands and claims arising out of or in connection with injuries (including death) or damages to any and all persons and to any and all property, in any way sustained or alleged to have been sustained as a result of activities relating to the Acadia Farm. This agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, and representatives, in the event of my death or incapacity. This Agreement shall be governed by and interpreted solely in accordance with the laws of Nova Scotia.

Please sign below in recognition of these terms and conditions.

NAME: _____ SIGNATURE: _____ DATE: _____

The Acadia Community Farm thanks you for your cooperation. Happy gardening!