



Community Service Form

Total hours needed: _____

Must complete by: _____ *Date*

Need service hours for:

General Information

Name: _____ age: _____ (if under 18)

Home Phone: _____ Cell Phone: _____

Address: _____

School (if applicable): _____

Parent's name _____ Parent's Number: _____

Why did you choose New Freedom Farm?

I, _____, hereby intending to be legally bound for
listed above, or parent of participant (please print)
myself, my heirs, and assigns, executors, or administrators, waive and release forever all claims for damages against New Freedom Farm, its Board of Directors, Officers, Agents, Instructors, Volunteers, Employees and Owners of horses on New Freedom Farm property for any and all injuries, illnesses and/or losses sustained by myself or my horse. I agree to indemnify New Freedom Farm for any and all claims arising directly or indirectly out of my use of New Freedom Farm facilities.

(signature if over 18) or Parent of person doing service

Date

*****WARNING*****

Under Virginia law, "an equine activity sponsor, an equine professional, or any other person, which shall include a corporation, partnership, or limited liability company, shall not be liable for an injury to or death of a participant resulting from the intrinsic dangers of equine activities..." pursuant to Chapter 62 of Title 3.2 of the official Code of Virginia.