

Waiver And Release Of Liability

Review Or Sign Online

In order to reserve a campsite, the principal party must be 18 years of age or older. No adult will be admitted into the campground without a signed release form on record. You can review or sign the release form below.

Waiver and Release of Liability

I, _____, at _____ (NAME) (ADDRESS) (INPUT BELOW) (herein after referred to as Releasor) hereby assume all risks of participating in any and all activities being conducted by Tom Ellison Farm and Tom Ellison and Laura Wagner (herein after Releasees) at 364 Southside Road Montgomery county, Arkansas. Camping Dates: April 5th-10th, 2024 Event: 2024 Solar Eclipse In consideration of permitting me to camp on the above described property and participate in the activities being conducted surrounding the Solar Eclipse of April 8th, 2024, I hereby take action for myself, my executors, administrators, personal representatives, heirs, next of kin, successors, and assigns as follows:

A) I WAIVE, RELEASE AND DISCHARGE Releasees, their officers, directors, members, employees and agents, collectively releases from any and all liability, including but not limited to, liability arising from the negligence or fault of the releasees, for personal injury, death or disability, property damage, theft or actions of any kind which may occur at the property or while participating in the event.

B) I INDEMNIFY, HOLD HARMLESS AND AGREE NOT TO SUE Releasees, their officers, directors, members, employees and agents, collectively releasees from any and all liabilities or claims made as a result of participation in this activity and event, whether caused by the releasees or a third party. I acknowledge that releasees are not responsible for the errors, omissions, acts, or failure to act of any party or entity conducting or participating in the event.

This Waiver and Release of Liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY.

Name *(Required)*

First

Last

Address *(Required)*

Street Address

Address Line 2

City

State / Province / Region

ZIP / Postal Code

United States 

Country

Signature *(Required)*



Age *(Required)*

Date *(Required)*

*If Participant is under 18 years old, Parent or Guardian must sign below: The undersigned parent and natural guardian does hereby represent that he/she is, in fact, acting in such

capacity, *has* consented to his/her child participation in the Event, and has agreed individually and on behalf of the child, to the terms of the waiver and release of liability set forth above. The undersigned parent or guardian further agrees to save and hold harmless and indemnify each and all of the parties referred to above from all liability, loss, cost, claim, or damage whatsoever which may be imposed upon said parties because of any defect in or lack of such capacity to so act and release said parties on behalf of the minor and the parents or legal guardian

Print Minor Participant's Name

Age

First

Last

Signature of Parent/Guardian

Date

