



**NEW JERSEY AGRICULTURAL SOCIETY  
VOLUNTEER ASSUMPTION OF RISK  
RELEASE OF LIABILITY AND INDEMNITY AGREEMENT**

I hereby request to be permitted to participate in the Gleaning/Harvesting Project (GHP) referenced below. I am aware that my participation in the GHP involves farm work, which includes, among other things, exposure to the elements, farm tools, and agricultural chemicals. I represent that I am in good physical condition and is able to participate in the activity of gleaning/harvesting. I understand that such participation presents a potential risk of injury, and I agree to assume any and all risk for injuries to myself arising out of, or related to, participation in the GHP and understand that the Released Parties (as such term is defined below) shall NOT be responsible or liable for any injury, damage, loss or expense to me, and/or my property incurred as a result of my participation in the GHP.

As a condition of my participation in the GHP, on behalf of myself, and my successors and assigns, I hereby agree to forever release, discharge, acquit, hold harmless and indemnify, New Jersey Agricultural Society, their affiliates and their respective members, partners, principals, shareholders, directors, officers, agents, employees, volunteers, and representatives (including, without limitation, any farmer or other landowner, landlord, land manager or tenant who grants access to farmer's property for purposes related to the GHP) and their respective successors and assigns ("Released Parties"), from any and all charges, complaints, claims, demands, obligations, damages, actions, causes of action, suits, rights, costs, losses, debts expenses (including attorney's fees and costs) liabilities, and indebtedness of every type, kind, nature, description or character, whether known or unknown, suspected or unsuspected, liquidated or unliquidated arising from, under, or related to, any act or omission of any of the Released Parties or myself, or otherwise in any way related to, or arising from, my participation in the GHP ("Released Matters").

I acknowledge that I have received, read and understood the Gleaning Volunteer Guidelines governing the GHP and agree that I will fully comply with these Guidelines. I agree that this Release shall be construed in accordance with the laws of the State of New Jersey, and that if any portion is deemed to be invalid, the remainder of the Agreement will remain valid and enforceable.

I acknowledge and agree that the releases made herein constitute final and complete releases of the Released Parties with respect to all Released Matters, and that by signing this Agreement, I am forever giving up the right to sue or attempt to recover money, damages or any other relief from the Released Parties for all claims I may have with respect to the Released Matters (even if any such claim is unforeseen as of the date hereof).

Volunteer Name \_\_\_\_\_ Group Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_

Email \_\_\_\_\_ (Optional if you would like to receive FAH updates)

Emergency Contact Name \_\_\_\_\_ Mobile Number: \_\_\_\_\_

I do \_\_\_\_ do not \_\_\_\_ (check one) grant permission for my picture to be taken and/or voice recorded and grant permission to use my photos and voice without restriction for the purposes of this project with or without my name, be it in print, projection, internet web site, video or social media for the use of publicity and advertising of the program.

Signature \_\_\_\_\_ Date \_\_\_\_\_