



# Alta Vista Gardens

*Bringing Together People, Nature and Art*

## Permission to Participate in Kids in the Garden Class

Reserve by phone or e-mail. Mail permission with check or check AVG Membership box.

Send to: Nancy B Jones 578 Mar Vista Drive VISTA 92081-7519

### Make Checks payable to Alta Vista Gardens

My child \_\_\_\_\_ Age \_\_\_\_\_ has my permission to participate in the **Kids in the Garden Class** at Alta Vista Gardens.

Series Discount 4 classes for \$18

My child is in \_\_\_\_\_ grade and attends \_\_\_\_\_ School.

Parent Name \_\_\_\_\_ Phone \_\_\_\_\_

E-mail \_\_\_\_\_  AVG member

I will make sure an adult is available in case of an emergency with my child during class.

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

## Alta Vista Gardens Participants Hold-Harmless Agreement

I fully understand and agree to assume all risks involved in any and all participation in activities at or in connection with Alta Vista Gardens. I agree to hold Alta Vista Gardens harmless for any injury(ies), loss or damages which I or children that I am responsible for might sustain in the course of my participation in activities at or in connection with Alta Vista Gardens.

This waiver includes myself, all of my family members and descendants forever from seeking any legal action whatsoever against Alta Vista Gardens or its successor organizations or any representatives thereof.

\_\_\_\_\_/\_\_\_\_\_/2011  
Signature of Participant Printed Name Date Signed

\_\_\_\_\_/\_\_\_\_\_/2011  
If a minor, Signature of Parent or Legal Guardian Printed Name Date Signed

**Instructions:** This agreement must be signed by ALL participants before participating in activities at or in connection with Alta Vista Gardens. This includes, but is not limited to, all volunteers, and adult or minor participants.

Please print and sign the agreement and send it by mail or deliver in person to the Alta Vista Gardens representative with whom you are working.

*Thank you, Alta Vista Gardens*