

Waiver of Liability

This agreement releases **Nature's Place Therapy Services** from all liability relating to injuries that may occur using the facilities of **Connections Park**. By signing this agreement, I agree to hold **Nature's Place Therapy Services** entirely free from any liability, including financial responsibility for injuries incurred, regardless of whether injuries are caused by negligence.

I also acknowledge the risks involved in using these facilities. These include but are not limited to: animal bites; animal fights; ingestion of plants/items along the trail (grass, twigs, trash, other animals' poop that hadn't cleaned up, etc although every effort is made by management to keep the path clean and clear); contact with allergy-producing plants--again every effort made to identify and remove these; stolen items that have been unattended by you. I swear that I am participating voluntarily, and that all risks have been made clear to me. Additionally, I do not have any conditions that will increase my likelihood of experiencing injuries while engaging in this activity.

By signing below I forfeit all right to bring a suit against **Nature's Therapy Services** for any reason. In return, I will be able to use the Connections Park facilities. I will also make every effort to obey safety precautions as listed in writing and as explained to me verbally. I will ask for clarification when needed.

I, _____, fully understand and agree to the above terms.

(Participant)

Date