

# AVCG Member Information and Signature

## Form for Minor Child

Admin	Member: _____	Plot: _____
Use	Date: _____	Paid: \$ _____
Only	Parking: _____	Crew: _____

Each person working in the garden must submit this form and complete the liability waiver (below, pg 2). For membership renewal, some fields are pre-populated with last year's information. You may make changes; some fields are required. If a required field is left blank, you will be asked to fill it in. Please read the Membership Agreement before completing this form.

Check one:  I am the primary member.  
 I am a secondary member.  
 My primary member's name is: \_\_\_\_\_

Please enter your name and contact information:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Home Address: \_\_\_\_\_

If you are a primary member, and you will have secondary members, please enter their names below. Check the box if the person is a minor child (under 18 years of age). Each adult secondary member must also fill out a copy of this form.

- 1) First: \_\_\_\_\_ Last: \_\_\_\_\_
- 2) First: \_\_\_\_\_ Last: \_\_\_\_\_
- 3) First: \_\_\_\_\_ Last: \_\_\_\_\_
- 4) First: \_\_\_\_\_ Last: \_\_\_\_\_
- 5) First: \_\_\_\_\_ Last: \_\_\_\_\_

What is your affiliation with UCI? \_\_\_\_\_

Will you need a parking permit or label extending the expiration date? \_\_\_\_\_

May we include your first name on a plot map posted on the garden shed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Sure
May we include your name and email address on the directory list available on request to other club members?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Sure
Would you like to volunteer to serve on the Steering Committee as a Member-at-Large? You will attend monthly meetings, provide input, and assist the Officers in managing the club activities and issues.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Sure
Will you "Take the Pledge" to garden using the AVCG Organic Gardening Guidelines?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Sure

***I have read and agree to abide by the rules and regulations listed in the [Membership Agreement](#) and on the club's [website](#) and understand that failure to do so may result in the relinquishment of my garden plot(s) and membership in the Anthill Village Community Garden Club. I also understand that existence of the garden at this site is at the discretion of the University.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Type your name as your electronic signature on this form or print the form and sign it. Scroll down for the Liability Waiver form.

Participant's Name (Please Print): \_\_\_\_\_ Plot #: \_\_\_\_\_

Check One:  New Member  Membership Renewal Member #: \_\_\_\_\_

### University of California Irvine

Registered /Recognized Student or Campus Organization (RSO)/(RCO)

Name of RSO /RCO: **Anthill Village Community Garden Club**

Membership Year: February 20, 2019 through February 19, 2020

### Waiver of Liability, Assumption of Risk, and Indemnity Agreement

**Waiver:** In consideration of permission to participate in both on and off campus activities as a member of the **Anthill Village Community Garden Club**, I, for myself, my heirs, personal representatives or assigns, **do hereby release, waive, discharge, and covenant not to sue** The Regents of the University of California, its directors, officers, employees, agents, and **Anthill Village Community Garden Club** and its officers and members from liability **from any and all claims including the negligence of The Regents of the University of California and Anthill Village Community Garden Club** resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in activities, classes, observation, and use of facilities, premises, or equipment.

\_\_\_\_\_  
Signature of Parent /Guardian of Minor Date  
Type your name as your electronic signature on this form  
or print the form and sign it.

\_\_\_\_\_  
Signature of User /Participant Date  
Type your name as your electronic signature on this form  
or print the form and sign it.

**Assumption of Risks:** Physical activity, outdoors or indoors, by its very nature, carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. **Anthill Village Community Garden Club** may use facilities, venues, or public outdoor spaces and make available activities such as sporting activities and leagues sports, classes, runs and races, outdoor adventures, community services, recitals and trips. Some of these involve strenuous exertions of strength using various muscle groups, some involve quick movements involving speed and change of direction, and others involve sustained physical activity which places stress on the cardiovascular system.

The specific risks vary from one activity to another, but the risks range from 1) minor injuries such as scratches, bruises, sprains, 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks and concussions, and 3) catastrophic injuries including paralysis and death.

**I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent** in the activities made possible by **Anthill Village Community Garden Club**. I hereby **assert that my participation is voluntary and that I knowingly assume all such risks**.

**Indemnification and Hold Harmless:** I also agree to INDEMNIFY AND HOLD The Regents of the University of California and **Anthill Village Community Garden Club** and its officers and members HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of my involvement in activities of **Anthill Village Community Garden Club** and to reimburse them for any such expenses incurred.

**Severability:** The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

**Acknowledgment of Understanding:** I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and **understand that I am giving up substantial rights, including my right to sue**. I acknowledge that I am signing the agreement freely and voluntarily, and **intend by my signature to be a complete and unconditional release of all liability** to the greatest extent allowed by law.

\_\_\_\_\_  
Signature of Parent /Guardian of Minor Date  
Participant's Age (if minor) \_\_\_\_\_  
Type your name as your electronic signature on this form  
or print the form and sign it.

\_\_\_\_\_  
Signature of User /Participant Date  
Type your name as your electronic signature on this form  
or print the form and sign it.