

EVENT PERMISSION FORM

Swallow Farm

Fall 2024 Barn Dance

All event attendees must return a signed permission slip and release in order to enter.

On Saturday, October 5 students will attend a barn dance event at Swallow Farm, located at 8030 Clikeman Rd., Rockford, IL 61101, with Hallstrom Home School Workshops ("HHSW").

I request that Swallow Farm permit my child _____ (Print Student's Name) to attend its barn dance event on October 5, 2024. I understand there is a risk my child could sustain injury or become ill during the event. I hereby release, indemnify, and hold harmless Swallow Farm, 8030 Clikeman Rd., Rockford IL, 61101, its owners, operators, staff, and volunteers, including, without limitation, Allan and Betsy Carlson ("Swallow Farm"), from any and all liability arising from claims of any kind or nature whatsoever from my child's participation in this event, including the aggravation of any prior existing injuries, except where such injury or illness was caused by the willful misconduct of Swallow Farm. I agree that Swallow Farm is not responsible for lost, stolen, or damaged property.

If emergency treatment is required, and the parents or legal guardian cannot be reached immediately, your signature in the space provided below empowers Swallow Farm to exercise their judgment to transport the child to a hospital emergency room.

This permission slip and release shall inure to the benefit of the legal representatives, licensees, and assigns of Swallow Farm, and shall be binding upon me and my heirs, legal representatives, and assigns.

Signature of Parent or Guardian _____ Date: _____

Address: _____
Street City State Zip

I can be reached on the day of the field trip at the following phone number: _____

HALLSTROM LIABILITY RELEASE WAIVER/COVID-19 DISCLAIMER/PHOTO RELEASE

Hallstrom Homeschool Workshops, Inc. Liability Release and Hold Harmless Agreement

As a participant in the programs of Hallstrom Homeschool Workshops, Inc. (HALLSTROM), I recognize and acknowledge that there are certain risks of physical injury to me and my family, including child(ren), and I agree to assume the full risk of any injuries, damages, or losses, which I or my child(ren) may sustain as a result of participating in all activities connected with or associated with HALLSTROM, including those conducted at Crosspoint Church (CROSSPOINT). I agree to relieve and relinquish all claims I or my child(ren) have, as a result of participating in the programs, against HALLSTROM and CROSSPOINT and their officers, agents and employees. I do hereby fully release and discharge HALLSTROM and CROSSPOINT and their officers, agents, and employees from any and all claims from injuries, damages, or losses, which I or my child(ren) may have or may accrue to me or them on an account of my or their negligence during participation in the programs. I agree to indemnify and hold harmless and defend HALLSTROM and CROSSPOINT and their officers, agents, and employees from all claims resulting from injuries, damages, and losses sustained during and arising out of the activities of the programs.

Coronavirus, COVID-19 is an extremely contagious virus that spreads easily through person-to-person contact and air particles. Federal and state authorities recommend social distancing as a mean to prevent the spread of the virus. COVID-19 can lead to severe illness, personal injury, permanent disability, and death. Participating in HALLSTROM programs could increase the risk of contracting COVID-19. HALLSTROM in no way warrants that COVID-19 infection will not occur through participation in HALLSTROM programs, including those conducted at CROSSPOINT. As a condition of my participation or my child(ren)'s participation in HALLSTROM'S programs, I accept any risk of infection from COVID-19. I specifically release and hold harmless HALLSTROM and CROSSPOINT from any losses, damages, or personal injury to myself, my children, or my household from participation in any HALLSTROM programming.

HALLSTROM reserves the right to take photography and video at all activities connected or associated with HALLSTROM to use for, but not limited to: yearbook, promotional materials, social media, and advertising efforts. I have read and understand the Release and Hold Harmless Agreement and the COVID-19 Warning and Disclaimer. I understand that my electronic signature is required to take part in HALLSTROM programs.

Participating Student Name

Parent/Guardian Signature

Date