

## **Visitor Waiver and Release of Liability Form**

This form must be signed and filled out prior to visiting Terra Bella Ranch, LLC (3389 Springwood Road, Fincastle, VA 24090) or attending any of our off-site events.

We are very excited about your visit to Terra Bella Ranch, LLC! And, we are sure that you will have a great time – it will be an experience you will never forget.

- 1) Individuals will be allowed to pet, groom, and potentially feed the animals (any/and all food must be approved by us, Kristen and Justin Terra). Be aware that animals can and will bite. Your interactions with our animals is at your own risk.
- 2) Please be sure that old clothes and shoes are worn to the farm. This is a real farm with mud and poop – please watch your step! 😊
- 3) We often take photos and/or videos of our visitors interacting with the animals. These photos may appear on our website and/or social media. If you do NOT want your photo used, please let us know.

I wish to visit and/or participate in activities sponsored by Terra Bella Ranch, LLC (owned by Kristen & Justin Terra). I understand that I do so at my own risk. I hereby release and waive any and all claims against Terra Bella Ranch, LLC and any entities affiliated with the foregoing from liability for any and all loss, damage, injuries, claims, demands, lawsuits, expenses, and any other liability of any kind, of or to me or any other person, directly or indirectly arising out of, or in connection with my visit or participation in any farm or animal activity. I further agree to hold harmless, indemnify and reimburse the released parties from and for any sums, costs, or expenses incurred by any of the released parties or paid by them to any person (including me or my insurers) in connection with any accident, loss, damage, or injury sustained by me or others in connection with my attendance, at or participation in, the above-described activities. This means that I will reimburse the released parties if anyone makes a claim against them based on damages or injuries I may suffer.

Name & Signature: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

Date: \_\_\_\_\_