



NVRH Community Gardens Risk Agreement- 2021

I understand that there is an implied risk to participating as a gardener in the NVRH Community Gardens. I understand that neither the NVRH Community Gardens group nor the hospital itself, nor, members of any group as part of the hospital (trustees, employees, board members) are responsible for my actions. I therefore agree to hold them harmless for any liability, damage, loss or claim that occurs in connection with the use of the Garden Plot# _____ by myself or any of my guests.

I understand that gardeners under no circumstances will be entitled, directly nor indirectly, to any refunds, or direct, incidental, consequential, punitive, nor other damages, any forms of compensation from NVRH (nor associates of NVRH), nor to obtain an injunction, specific performance or other equitable remedy, as a consequence of termination from participation in the Community Gardens Project.

Signature

Date

Printed Name

Phone#

Address