

**University of Tennessee AgResearch Liability Waiver for
On-Farm Tours and Other Activities**

I, _____ (Participant's Name), acknowledge that I have voluntarily requested permission to enter the agricultural research property located at _____ on today's date, _____.

I have voluntarily applied to participate in a guided tour of the property. I understand that there are known risks that may be potentially harmful present on the property, including but not limited to live animals, pathogens, large equipment, chemicals, and other farm related risks. I understand that by interacting with the above risks, that I may experience potential injury.

Therefore, I understand that by entering the property stated above, I am aware of the risks that may result in injury, illness, or death due to hazardous conditions found to be on the property. I take full responsibility for all potential risks of illness, injury, death, or damage to my personal property.

By signing below, I acknowledge that I will not hold liable the University of Tennessee or its constituents for any of the above experienced while visiting the aforementioned property. I also acknowledge that I have not visited a foreign animal facility in the past 10 days.

_____ Participant (or Legal Guardian of Participant) _____ Date

Name(s) of minor(s) participating _____

