



VERTICAL AGRICULTURE RELEASE FORM

VIDEO/PHOTOGRAPH/INFORMATION RELEASE FORM

I consent to the College of Southern Maryland and the Vertical Agriculture practicum partners to take photos and/or videos of me at both the College of Southern Maryland and any of the Vertical Agriculture practicum sites. I understand that the College of Southern Maryland and the Vertical Agriculture practicum partners may display all or excerpts of the photographs in any media for educational, news, marketing, advertising, fund-raising, or other reasonable academic purposes, and I hereby grant them the right to do so. I agree that I will not receive compensation for the release of the photos or videos.

PERSONAL INJURY LIABILITY WAIVER AND RISK AGREEMENT

I acknowledge and fully understand that by participating in the College of Maryland's Vertical Agriculture practicum at any of the practicum locations, I will be exposing myself to the inherent risks associated with agricultural activities. These risks include, but are not limited to, lifting potentially heavy objects, utilizing farm machinery, performing tasks that may cause physical exertion, and exposure to potentially hazardous chemicals, such as fertilizers or disinfectants. I also acknowledge that participation in the Vertical Agriculture Practicum will require travel to and from practicum sites, which involves additional risks. These risks include, but are not limited to, hazardous weather or road conditions, motor vehicle accidents, and various unforeseen travel-related incidents.

1. I acknowledge that I assume all risks and responsibilities that are associated with participating in the Vertical Agriculture Practicum at all practicum locations. Practicum locations include, but are not limited to, local farms and grow rooms, farmers' markets, farm stores, and site visits to locations relevant to my practicum experience.
2. I acknowledge that I am responsible for all travel to and from all practicum locations related to participation in this class.

I agree to release, waive, discharge, and covenant not to sue the College of Southern Maryland, and any of their representatives, as well as at any practicum locations

College of Southern Maryland

8730 Mitchell Rd, PO Box 910, La Plata, MD 20646
301-934-2251 | askme@csmd.edu

csmd.edu

associated with my practicum experience from any and all liability, claims, demands, actions, and causes of action arising out of or related to any loss, damage, or injury, that may be sustained by me, or any property belonging to me, while participating in the Vertical Agriculture Practicum, while in, on, or upon the premises where the practicum is being conducted. Furthermore, I agree to follow all safety rules and regulations set by the College of Southern Maryland and by its Vertical Agriculture Practicum sites. I understand that if I should become injured during my practicum experience, local emergency services will be contacted. I understand that I am responsible for the costs associated with medical care.

VERTICAL AGRICULTURE PRACTICUM CONFIDENTIALITY AGREEMENT

During my practicum, I am working with small businesses and farms in my community. While working with my practicum host site, I might encounter confidential trade secrets. Trade secrets are pieces of information that are valuable to my practicum host site. Trade secrets include but are not limited to techniques, discoveries, processes, business partners, and customer lists. By continuing with this registration, I agree to the following:

1. I have read and understand the definition of trade secrets.
 2. I agree to respect and uphold all the following privacy/confidentiality requirements both during and after my vertical agriculture practicum experience at **all locations** associated with Vertical Agriculture training at CSM.
- I agree that I will not take any photos or videos on-site at any of the locations associated with my practicum experience.
 - I agree not to disclose any confidential information or photos/videos through any type of communication and to only discuss confidential information in classroom settings associated with the Vertical Agriculture Program.
 - I agree that administration at CSM and/or our Vertical Agriculture practicum partners may periodically search for breaches in their privacy policies.

By completing this registration, I agree to all policies outlined herein. I agree with the Video/Photograph Information and Release. I agree with the Personal Injury Liability Waiver and Risk Agreement. I agree with the Vertical Agriculture Practicum Confidentiality Agreement. I agree that I am at least 18 years old, and I understand that I will be held responsible for noncompliance with these agreements.

By signing this document, I agree that I am 18 years of age or older, or the parent or guardian of the student.

Signature

Date

Printed name

If the individual is under 18, a parent or legal guardian must sign and date the document.

Signature of parent/legal guardian

Date

Printed name of parent/legal guardian