I acknowledge that participating in the Chivas Skin Care “Open Farm” Event, an open farm boutique, related activities and other Chivas Skin Care “Open Farm” events (referred to as the “Event”) involves an above average risk of personal injury to me and my property, and I knowingly and voluntarily agree to the terms and conditions outlined in this CONSENT, WAIVER AND RELEASE FROM LIABILITY. In consideration and exchange for being permitted to participate in this event, I agree to the following:

I am in good health and have no physical conditions that affect my ability to participate in the Event and have not been advised otherwise by a medical practitioner. I am covered by medical insurance, individually or as part of an organization. I agree that before I participate in any portion of the Event, I will inspect the related facilities, site, and equipment. I will immediately advise Event personnel of any unsafe condition that I observe. I will refuse to participate in the Event until all unsafe conditions have been remedied. I will abide by any safety guidelines made available to me. I consent to the use and publication of my name and image in all forms of media while participating in the Event.

I assume full responsibility for all risks associated with my participating in the Event and the risk of injury or damage caused by the condition of any property, animals, facilities, or equipment used during the Event, which may not be foreseeable by anyone at any time. I hereby release, waive, discharge and agree not to sue the participants in the Event, Chivas Skin Care, and other Event vendors or organizations, along with their parent companies, affiliate, and their successors and assigns (collectively referred to as the “Companies”), their respective employees, shareholders, members, officers, directors, agents, or volunteers for and from any injuries, death, losses, damages, liabilities, or expenses that are caused or alleged to be caused by their negligent acts or omissions, or the condition of the property, animals, facilities or equipment used for the Event.

I agree to indemnify, defend, and hold harmless all participants in the Event and the Companies and their employees, shareholders, members, officers, directors, agents, and volunteers from and against any claims, causes of action, damages, judgments, liabilities, fees (including attorney’s fees), costs and expenses incurred by Companies as a result of my unlawful actions or failures to act during the Event.

This waiver and release is a legally binding agreement and will be construed broadly to provide a waiver and release to the maximum extent permissible under applicable law. Any provisions of this agreement shall apply to the current Event and to any future Event.

I agree if there should ever be a dispute of any kind between me and Chivas Skin Care or other Event vendors or organizations then any such dispute will be decided by binding arbitration pursuant to California Law and the rules of the American Arbitration Association and that any and all legal proceeding shall take place only in Ventura County, California. This agreement shall be enforced and construed according to the laws of the state of California.

I HAVE READ THIS DOCUMENT AND I UNDERSTAND ITS CONTENT. I UNDERSTAND THAT BY SIGNING BELOW, I HAVE GIVEN UP SUBSTANTIAL RIGHTS. I HAVE VOLUNTARILY SIGNED THIS RELEASE, I AGREE THIS DOCUMENT IS NOT ONLY BINDING ON ME BUT WILL ALSO BE BINDING UPON MY PERSONAL REPRESENTATIVES, EXECUTORS, HEIRS AND NEXT OF KIN.

Signature of Participant __________________________ Date __________________________

Printed Name ____________________________________________

Phone (____)________________________ Email ________________________________

PARENT or GUARDIAN CONSENT (If participant is under age 18): I am the parent or legal guardian of the participant and I agree that the foregoing agreement shall be binding on me and the minor participant.

Signature of Participant’s Parent or Guardian __________________________

Printed Names of Minors __________________________________________

Emergency Contact Person: ______________________________________ Phone (____)________________________