



2025 Live Learn & Lead  
Vocational Farm Participant Application

Please answer all questions in their entirety.

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

Person completing this form: \_\_\_\_\_

Relationship to participant: \_\_\_\_\_

Participant General information

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Nickname or the name would like to go by: \_\_\_\_\_

Sex: M \_\_\_\_\_ F \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Race/Ethnicity \_\_\_\_\_

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

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

Primary phone: \_\_\_\_\_ may we send text messages to this phone? Yes \_\_\_\_\_ No \_\_\_\_\_

Email: \_\_\_\_\_

Parent/Guardian Information

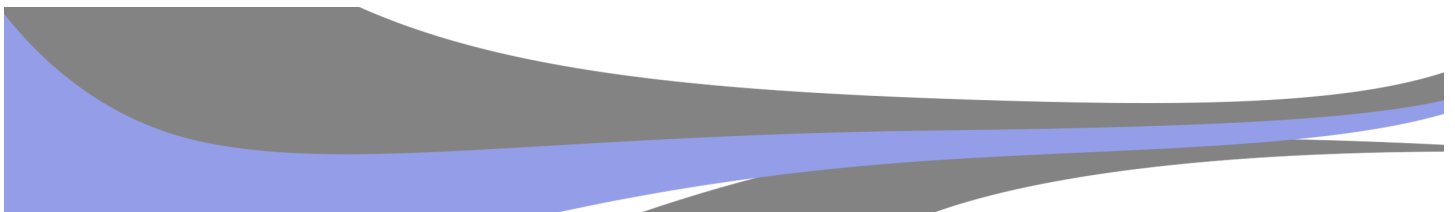
Name: \_\_\_\_\_

Address (if different from participants): \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

Phone: \_\_\_\_\_ may we send text messages to this phone? Yes \_\_\_\_\_ No \_\_\_\_\_

Email: \_\_\_\_\_



Accommodation Inquiry:

Please take a moment to provide us with information about any accommodations you may need. All information is kept confidential.

Do you have a disability?

If yes please specify \_\_\_\_\_

Brief description of how it affects you: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What can we do to be helpful to you? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Emergency Information**

Emergency contact (*other than Parent/Guardian*): \_\_\_\_\_ Relationship: \_\_\_\_\_

**Emergency contact will be used if unable to reach parent or guardian at above phone numbers.**

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

Phone: \_\_\_\_\_ may we send text messages to this phone? Yes \_\_\_ No \_\_\_

Doctor's name: \_\_\_\_\_ Doctor's Phone: \_\_\_\_\_

**Authorization for Emergency Medical Treatment**

I authorize Live Learn and Lead Staff to arrange for emergency medical treatment, in the event of any injury to above named participant, and if I or my designated emergency contact cannot be reached by Live Learn and Lead Staff.

\_\_\_\_\_  
Signature of participant if over 18, Parent or Guardian

\_\_\_\_\_  
Date

**\*\*Live Learn and Lead - Client Agreement 2024\*\***

Please carefully review the following information.

**\*\*1. Session Duration and Pricing:\*\***

Our standard session duration is 60 minutes. Individual is \$30 per hour. Family Session is \$60 per hour.

**\*\*2. Scheduling Sessions:\*\***

To facilitate the scheduling process, we will be providing you with a 2025 calendar. Please use this calendar to plan and schedule your sessions. We encourage you to schedule sessions in advance to secure your preferred time slots.

**\*\*3. Cancellation and Rescheduling:\*\***

If you need to cancel or reschedule a session, please inform us as soon as possible. We understand that unforeseen circumstances may arise, and we appreciate your cooperation in keeping us informed. Consistent attendance is crucial for the ongoing development of skills and task independence.

**\*\*4. Illness Policy:\*\***

In the event of illness, kindly notify us as soon as possible. If your student is experiencing symptoms such as a fever, cough, runny nose, or any other contagious illness, we request that you postpone the session until the student is feeling better. If students takes a sick day from school we ask that they stay home from class until feeling better. We strive to maintain a healthy environment for the well-being of our students, staff, and animals.

**\*\*5. Our Commitment:\*\***

We genuinely enjoy working with your student and are dedicated to providing a positive and effective learning experience. Regular sessions contribute significantly to skill-building and task independence, and we encourage you to maintain a consistent schedule.

## Live Learn and Lead Vocational Farm Waiver

### Important Information

You are responsible for determining if you or your child is physically fit and/or adequately skilled for the program contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or has recently suffered an illness, injury or impairment, to consult a physician before under taking any physical activity.

### Warning of Risk

Live Learn and Lead Vocational Farm is intended to challenge and engage the physical, mental, and emotional resources of each participant. Despite careful and proper preparation and instruction there is still a risk of serious injury when participating in the program. All hazards and dangers cannot be foreseen. Certain risks, dangers, and injuries may exist due to inclement weather, slips and falls, poor skill level or conditioning, and carelessness. In this regard, it is impossible for Live Learn and Lead staff to guarantee absolute safety.

### Waiver and Release of all Claims and Assumptions of Risk

Please read this form carefully and be aware that in signing up and participating in this program, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your child might sustain as a result of participating in the program. I recognize and acknowledge that there are certain risks of physical injury to the participant in this program, and I voluntarily agree to assume the full risk of any and all injuries, damage or loss, regardless of severity, that my child or I may sustain as a result of participation. I further agree to waive and relinquish all claims I or my child may have as a result of participating in this program against Live Learn and Lead Vocational Farm, including its board, executive director, volunteers, and employees.

I have read and fully understand the above important information, warning or risk, assumption of risk and waiver and release of all claims. If registering on-line or via fax, my online or facsimile signature shall substitute for and have the same legal effect as an original form signature.

PLEASE PRINT

Participant's Name \_\_\_\_\_

Participant's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Legal Guardian \_\_\_\_\_ Date: \_\_\_\_\_

\*\*Participation will be denied if the signature of adult participant or guardian and date are not on this waiver.

Photo Release

I/We grant Live Learn and Lead Vocational Farm, its representatives, and employees the right to take photographs/videos in connection with activities at Live Learn and Lead Vocational Farm. I/We authorize Live Learn and Lead to use or publish images/videos in print and/or electronically. I/We agree that Live Learn and Lead may use such photographs/videos with or without my name and for any lawful purpose, including for example such purpose as publicity, advertising, illustration, and web content. I/We have read, understand, and agree to the above photo release statements.

PLEASE PRINT

Participant's Name \_\_\_\_\_

Participant's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Legal Guardian \_\_\_\_\_ Date: \_\_\_\_\_

Please circle session days.

Please circle session days.

# 2025

**JANUARY**

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**FEBRUARY**

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**MARCH**

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**APRIL**

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**MAY**

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**JUNE**

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**JULY**

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**AUGUST**

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**SEPTEMBER**

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**OCTOBER**

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**NOVEMBER**

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**DECEMBER**

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## Schedule

When scheduling your session please note:

The 3rd week of July is unavailable for Kane County Fair preparation.

Weekend sessions are unavailable at this time.

## Special Request:

We are reaching out to you with a special request. Live Learn and Lead, a recognized 501(c)(3) non-profit organization, is on a mission to enhance our farm's sustainability and impact.

We believe in the power of collaboration, and your support can make a significant difference. We are currently seeking sponsorship, grants, and corporate donations to further our initiatives and positively impact the community.

Your assistance in leveraging your resources and networks to help us identify potential sponsors, foundations offering grants, and corporate partners would be immensely valuable. By joining forces, we can continue to make a lasting impact on our community.

If you have any leads, contacts, or insights that could aid us in securing the support we need, please don't hesitate to reach out. Your contribution to this cause is vital, and together, we can create a sustainable and thriving future for our farm and the communities we serve.

Thank you for considering our request. Your ongoing support means the world to us.

We thank you for believing in the work that we do here at Live Learn and Lead.

Please return paperwork via email at: [info@livelearnandlead.org](mailto:info@livelearnandlead.org)

or

Mail: Live Learn and Lead  
120 Jack Dylan Dr  
Hampshire, IL 60140

Any questions please call Didi Dowling at 815-354-4983