

Registration Form for Individual/Family Membership in the Egg Co-operative at the John Tay Homestead

Full Street & Mailing Address:	
	cipants. Please distinguish individuals' information by name. Cell:
	E-mail:
Names & Ages of Additional Family Parti	cipants (under the age of 18) in this membership:
TERMS & CONDITION	S OF MEMBERSHIP IN THE EGG CO-OPERATIVE
$\bullet~$ I understand that the period of membership is for 1 I will participate in a "hands on" training session with a	year as of the date of registration and that my membership fee of \$250 per year is non-refundable. co-op member before the start of my duties.
• I will provide care for the chickens on a regular day memberships/families, so my responsibility is typically	each week, choosing either a morning or an evening shift. Most shifts are shared by two for once every two weeks.
	are as follows: Let the chickens out of the coops, replenish food & water, gather & record the sobserved. Before leaving, check to make sure the fence is secure and the electricity is on.
	asic responsibilities are as follows: Ensure chickens are closed up in their coops, gather and record ssues observed. Before leaving, check to make sure the fence is secure and the electricity is on.
• I will take home my share of eggs at the end of my is no guarantee as to the number of eggs I will receive.	shift - one share per shift. I understand that my share will vary from week to week and that there
	op cleanup about once per month (typically Saturday morning at 8:30). A crew of 4-5 members aterial, and moves the coops and fences to fresh grass during the warmer months.
By my signature below I assert that I have read	d and do understand and accept all above terms & conditions.
	Date:
	Date:
In consideration of the permission of InterG	D INDEMNIFICATION AGREEMENT (for each Adult Participant) enerate, Inc. and the Heritage Egg Co-op Advisory Committee to participate in e at John Jay Homestead (hereinafter, "The Co-op"), I/we,, my/our family members, guests,
employees, & agents, and all members of Th participation in The Co- op. I hereby agree to	ease and discharge InterGenerate, Inc., its elected and appointed officials, e Co-op from claims and charges for any and all liability arising from a indemnify and hold all aforementioned parties harmless from any and all costs, ity that may be made by the participant or third parties from participation in
Signature of Adult Participant:	Signature of Adult Participant:
Participant Name Printed:	Participant Name Printed:
Witness Signature:	
Date:	