

## Waiver of Liability and Indemnification Agreement

This Waiver of Liability and Indemnification Agreement will apply to all applications, in accordance with labeling instructions, of Dual MAGNUM on spinach during the calendar year indicated below (user and/or grower signature and date). A new waiver of liability and Indemnification Agreement will be signed each calendar year.

County or Counties	Acres	Rate per Acre

Mail this form with the administration fee to the Vegetable Growers Association of New Jersey, C/O 1109 Porchtown Rd., Pittsgrove, NJ 08318. A copy will be returned for your records. Contact Donna Dugan at 856-358-2064 fax 856-455-3133 or donnavga52010@comcast.net for more information.

Grower and/or User Signature	Date
Name (print)	Phone
Fax (optional)	E-mail (optional)
Address	City, State, Zip

**STATE OF NEW JERSEY** \_\_\_\_\_ County

I, \_\_\_\_\_, a Notary for said County and State, do hereby certify that \_\_\_\_\_ personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal, this the \_\_\_\_\_ day of \_\_\_\_\_

Notary Public \_\_\_\_\_

My commission expires \_\_\_\_\_

**THE VEGETABLE GROWERS ASSOCIATION OF NEW JERSEY AUTHORIZATION:**

Authorized Signature	Payment
Date _____	

Fee to Recoup Cost of Third Party Label Program:

_____ VGANJ Member	\$25
_____ VGANJ non-members	\$125 (includes \$100 membership fee)
_____ Optional return by next day mail	\$10

Total Due VGANJ: \_\_\_\_\_