

# Henry County Humane Society

## Release of Liability, Indemnification, and Consent Form

I, \_\_\_\_\_, hereby agree to volunteer for the Henry County Humane Society, (herein after referred to as HCCHS), and in so doing, I agree to comply with all the rules and regulations established by HCCHS, and I understand that failure to do so may result in my immediate termination as a volunteer. As a volunteer, I agree to do my best to represent HCCHS to the public in an accurate and professional manner.

I acknowledge that my services are provided strictly on a volunteer basis, without pay or compensation of any kind, and without liability of any nature on behalf of HCCHS, and all services are to be performed at my own risk.

I recognize that in handling animals and performing other tasks, therein exists a risk of injury including physical harm caused by the animals. I agree to release and hold harmless HCCHS and any of its officers, directors, employees, affiliates, agents, volunteers, representatives, successors and assigns from and against any and all loss, damage, claims, liability, costs and expenses of any nature whatsoever, including without limitation attorney's fees and disbursements, arising from or occasioned by my services to HCCHS. I understand if an accident or injury should occur, no matter how minor, that I will complete a Volunteer Injury Report form and seek any necessary medical attention utilizing my own medical insurance.

I understand that if I am or become pregnant while volunteering at HCCHS or have medical conditions that compromise my immune system, that I should talk to my doctor and get my doctor's approval to volunteer in an animal shelter.

I agree that HCCHS may photograph my participation with HCCHS, and I hereby release any such photographs to HCCHS for use in its programs, publications and purposes.

I understand and acknowledge that the Henry County Humane Society has voluntarily offered me the opportunity to have personal contact with one or more animals housed at the shelter. I understand and acknowledge that I have voluntarily selected the animal(s) I wish to have personal contact with and I knowingly assume the risk of such contact, to include the following: any and all bites, scratches, violent attacks, other personal injury and/or property damage caused by my exposure to and or handling of such animal(s).

In exchange for the opportunity to visit said animal(s), Henry County Humane Society and its volunteers and representatives are hereby released from any and all liability for any and all injuries and/or damage resulting from such exposure and contact.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

