NEW HOPE PET RESCUE

VOLUNTEER WAIVER AND RELEASE FORM

Volunteer Name:
Check here if Volunteer is under age 18
Contact E-mail (required):
Parent or Legal Guardian Email (required if Volunteer is under age 18):
Address:
Phone:
Emergency Contact Name:
Relationship to Participant:
Phone Number:

ALL VOLUNTEERS MUST COMPLETE THE WAIVER AND RELEASE FORM

PARENT/LEGAL GUARDIAN SIGNATURE IS REQUIRED IF VOLUNTEER IS UNDER AGE 18

New Hope Pet Rescue 815 N. Sheldon Charlotte, MI 48813 newhopepetrescue@gmail.com Text Only: 989 640-0138

WAIVER AND RELEASE FORM

RELEASE OF LIABILITY

In consideration of the risk of injury while participating in Volunteering to care for foster pets with New Hope Pet Rescue (the "activity") and as consideration for the right to participate in the Activity, I hereby for myself or as the Parent/Legal guardian on behalf of the volunteer knowingly and voluntarily enter into this waiver and release of liability and hereby waive any and all rights, claims or causes of action of any kind whatsoever arising out of my participation in the Activity and do hereby release and forever discharge New Hope Pet Rescue located at 9290 Westchester Dr., Laingsburg, MI 48848, their officers, directors, employees, sub-contractors, sponsors, agents, staff, representatives, heirs, predecessors, successors, assigns, and affiliates ("the Rescue") for any physical or psychological injury, including, but not limited to, illness, paralysis, death, damages, economical or emotional loss, property damage, or the same or similar damage to a third party while a pet is in my care as a direct result of my participation in the Activities wherever, whenever, or however the same may occur including traveling to and from an event related to this Activity. I further acknowledge that this waiver is effective against my heirs, executors, administrators, assigns, or personal representatives.

I AM VOLUNTARILY PARTICIPATING IN THE AFOREMENTIONED ACTIVITY ENTIRLEY AT MY OWN RISK. I AM AWARE OF THE RISKS ASSOCIATED WITH TRAVELING TO AND FROM THE ACTIVITY AS WELL AS PARTICIPATING IN THE ACTIVITY INCLUDING, BUT NOT LIMITED TO, PHYSICAL OR PSYCHOLOGICAL INJURY, PAIN, SUFFERING, ILLNESS, DISFIGUREMENT, REMPORARY OR PERMANENT DISABILITY (INCLUDING PARALYSIS), ECONOMIC OR EMOTIONAL LOSS, PROPERTY DAMAGE TO MY OWN PROPERTY OR A THIRD PARTY'S PROPERTY, DOG BITES, DOG SCRATCHES, ALERGIC REACTION, AND DEATH. I UNDERSTAND THAT THESE INJURIES OR OUTCOMES MAY ARISE FROM MY OWN OR OTHERS' NEGLIGENCE, CONDITIONS RELATED TO TRAVEL, THE ANIMALS I WILL BE HANDLING, OR THE CONDITION OF THE ACTIVITY LOCATION(S). NONETHELESS, I ASSUME ALL RELATED RISKS, BOTH KNOWN OR UNKNOWN TO ME, OF MY PARTICIPATION IN THIS ACTIVITY, INCLUDING TRAVEL TO, FROM, AND DURING THIS ACTIVITY.

I also agree to indemnify and hold harmless the New Hope Pet Rescue and their officers, directors, employees, sub-contractors, sponsors, agents, staff, representatives, heirs, predecessors, successors, assigns, and affiliates ("the Rescue") for all claims, suits or actions of any kind whatsoever for liability, damages, compensation or otherwise brought by me or anyone on my behalf, including attorney's fees and any related costs, if litigation arises pursuant to any claims made by me or by anyone else acting on my behalf arising out of or relating to my volunteering with New Hope Pet Rescue and engaging in the Activity.

I understand that this document is intended to be as broad and inclusive as permitted by the laws of the state in which the Volunteer Activities take place and agree that if any portion of this Agreement is invalid, the remainder will continue in full legal force and effect.

I also acknowledge that the Rescue has not arranged and does not carry any insurance of any kind for my benefit or that of Volunteer (if Volunteer is under 18), my parents, guardians, trustees, heirs, executors, administrators, successors and assigns. I represent that, to my knowledge, I am in good health and suffer no physical impairment that would or should prevent my participation in Volunteer Activities.

In the event that I should require medical care or treatment, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

I also understand that this document is a contract which grants certain rights to and eliminates the liability of the Rescue.

I understand and agree that the Rescue is not responsible for any injury or property damage arising out of the Volunteer Activities, even if caused by their ordinary negligence or otherwise.

(Continued on next page)

ACTION AND TAGREE TO VOLUNTARILY GIVE UP OR WAIVE ANY RIGHT THAT TO THERWISE HAVE TO BRING A LEGAL ACTION AGAINST NEW HOPE PET RESCUE FOR PERSONAL INJURY OR PROPERTY DAMAGE.		
(Signature of Volunteer)	Date	
I am of legal age and am freely signing this agreemen giving up legal rights and remedies.	nt. I have read this form and understand that by signing this	form, I ar

I ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS "WAIVER AND RELEASE" AND FULLY UNDERSTAND THAT IT IS A RELEASE OF LIBAILTIY. I EXPRESSLY AGREE TO RELEASE AND DISCHARGE NEW HOPE PET RESCUE AND ALL OF ITS OFFICERS, DIRECTORS, EMPLOYEES, SUB-CONTRACTORS, SPONSORS, AGENTS, STAFF, REPRESENTATIVES, HEIRS, PREDECESSORS, SUCCESSORS, ASSIGNS, AND AFFILIATES ("THE RESCUE) FROM ANY AND ALL CLAIMS OR CAUSES OF

I am the parent or legal guardian of the Volunteer. I am of legal age and am freely signing this agreement. I have read this form and understand that by signing this form, I am giving up legal rights and remedies.

Date

(Signature of Parent/Legal Guardian if Volunteer is Under 18)

PUBLICITY RELEASE

In return for being allowed to participate in New Hope Pet Rescue volunteer activities and all related activities, including any activities incidental to such participation ("Volunteer Activities"), the undersigned Volunteer or Parent/Legal Guardian of Volunteer if Volunteer is under age 18 (hereafter referred to using "I", "me", or "my") hereby grants to the Rescue, and each of its subsidiaries, affiliates, agents, advertising or promotional agencies, and partners, and all such entities' officers, directors, agents, employees, respective successors and assigns (collectively, "Authorized Parties"), the absolute and irrevocable right and permission to use, publish, broadcast and/or copyright the use of Volunteer's name, address, voice, photograph and/or likeness, caricature, and personal information, in its current form or as retouched, digitized, cropped, altered, distorted or modified in any way, in any and all advertising, promotional, or other materials based upon or derived from the Volunteer Activities in any manner, in any media whatso- ever for any and all purposes, including by way of example but without limitation advertising, promoting or publicizing products and services throughout the universe, in perpetuity, in any and all media now known or hereafter devised (including without limitation on the Internet), without additional compensation. I further agree that anything derived there from will be owned solely by the Authorized Parties.

I understand that this document is intended to be as broad and inclusive as permitted by the laws of the state in which the Volunteer Activities take place and agree that if any portion of this Agreement is invalid, the remainder will continue in full legal force and effect.

(Signature of Volunteer) Date

I am of legal age and am freely signing this agreement. I have read this form and understand that by signing this form, I am giving up legal rights and remedies.

(Signature of Parent/Legal Guardian if Volunteer is Under 18)

Date

I am the parent or legal guardian of the Volunteer. I am of legal age and am freely signing this agreement. I have read this form and understand that by signing this form, I am giving up legal rights and remedies.