Barking Holler Animal Sanctuary Volunteer Waiver

| First Name: | |
|---|------------------|
| Last Name: | |
| Date of Birth: | _ |
| Address: | |
| Home Phone: | |
| Cell Phone: | |
| Email: | |
| EMERGENCY CONTACT INFORMATION In case of emergency, I authorize Barking Holler Animal Sanctua contacts listed below: | ry to notify the |
| Primary Emergency Contact: | |
| Name / Relationship: | |
| Address: | |
| Phone Number(s): | |
| Secondary Emergency Contact: | |
| Name / Relationship: | |
| Address: | |
| Phone Number(s): | |
| Signature: Date | |

RELEASE OF LIABILITY AND WAIVER

- I understand that because I may handle and/or come in contact with animals, it is important to discuss being vaccinated against tetanus with my physician. I release Barking Holler Animal Sanctuary from all responsibility that may occur because of my not pursuing this matter further and I understand whatever decision I make is at my own risk. I have read, understand and agree to the above tetanus information.
- I acknowledge and understand that as a volunteer of Barking Holler Animal Sanctuary I am not covered by workers' compensation or any other insurance policy through Barking Holler Animal Sanctuary for any damages or injuries I may sustain during volunteer activities. I understand that I am responsible for obtaining health insurance coverage through an independent health insurance company.
- I fully understand that as a part of my volunteer work for Barking Holler Animal Sanctuary I will come into contact with animals either by directly handling them, fostering or through assisting in their care and adoption. Further, I understand that working with animals carries a risk of injury, and that it is possible that I may be bitten, scratched, and/or otherwise injured.
- I fully understand that as a volunteer and/or foster home Barking Holler Animal Sanctuary my family may come in contact with animals at Barking Holler Animal Sanctuary events, and I and my family and/or guests may come into contact with animals in my home if I am fostering an animal. I understand that working with animals carries a risk of injury, and it is possible that my family and/or guests may be bitten, scratched and/or otherwise injured.

My signature to this volunteer liability release attests to my intent to hold harmless and release from all liability Barking Holler Animal Sanctuary or any of its past, present or future Officers, agents, volunteers, employees or assigns, from all acts which are related to the normal performance of required and implied duties. My signature, whether original, by fax or any other electronic means, is valid as if it were an original signature.