

VOLUNTEER LIABILITY RELEASE AND HOLD HARMLESS

Ark Animal Hospital

I, ______, the undersigned volunteer of Ark Animal Hospital, understands that I am not an employee, agent, subcontractor, or independent contractor of or any agent of Ark Animal Hospital. I further understand that Ark Animal Hospital will not provide me with any pay, compensation, insurance, workers' compensation, or any other benefit to which an employee may be entitled.

In consideration of my being allowed to work as a volunteer for Ark Animal Hospital for the purpose of general care of the animals located there, I, the undersigned, hereby release, forever discharge and agree to indemnify and to hold harmless Ark Animal Hospital and its officers, directors, animal partners, and owner of property to whom they are contractually obligated to from and against any and all liability, claims or demands for personal injury, sickness or death as well as property damage and expenses, and including, without limitation, attorney fees and court costs and any and all other liabilities of any nature whatsoever which may be incurred by me or which may arise from my activities as a volunteer.

By signing this form, I am acknowledging that I have read the contents of this Release/Hold Harmless Agreement in its entirety.

·	birth date is// (if under 18, volunteer must also obtain parent/guardian re		
below) Agreed to this	day of	. 20	
	uay of	, 20	
Volunteer Signature Clear	rly Print- Volunteer Name		
Street Address		Apt #	
City	State	Zip	

Parental/Guardian Release

In addition to the above waivers and releases, I, the parent/guardian of the above-named volunteer who is under the age of 18 years, do for myself, for the other parent of the child if any and or on behalf of my child, volunteer hereby release, forever discharge and agree to indemnify and to hold harmless Ark Animal Hospital it's officers, directors, animal partners, property owner who they are contractually obligated to from and against any and all liability, claims or demands for personal injury, sickness or death as well as property damage and expenses and including, without limitation,

attorney fees and court costs, and any and all other liabilities of any nature whatsoever which may be incurred by my child volunteer or which may arise from the child volunteer's activities for Ark Animal Hospital.

Parent/Guardian Signature _____ Date_____

Phone E-Mail

Parent/Guardian Name ______Phone _____Phone _____