



Bullies and Buddies Rescue Volunteer Release of Liability Form

Name:

Address:

Email:

Phone:

My signature below indicates that I have read, understand, and agree to the following.

- 1) I agree to be a volunteer for Bullies and Buddies Rescue and assist in pet adoptions.
- 2) I have been given a copy of the Bullies and Buddies Rules and Procedures and I agree to follow all rules, policies, and procedures. If I fail to comply with these rules, I will be terminated from the volunteer or foster program.
- 3) I understand that the behavior of dogs is unpredictable and that some dogs are capable of inflicting serious personal injury or death as well as property damage. I, therefore, agree that if I choose to walk, handle, foster, transport, or care for a Bullies and Buddies dog, I will do so at my own risk.
- 4) I understand that Bullies and Buddies is not responsible for any illness or injury caused by any dog that I come into contact with during my volunteer work. I hereby agree and release, indemnify, and hold harmless Bullies and Buddies, associated Directors, Agents, Fosters, Trainers, and adoption venues from any and all claims, damages, and liability arising from or related to my activities as a Bullies and Buddies volunteer.
- 5) I hereby release, forever discharge, and agree to indemnify and hold harmless Bullies and Buddies, its Directors, Agents, Trainers, and adoption venues from any and all liability claims or demands for personal injury, sickness, or death, as well as property damage, expenses, and all other liabilities which may arise from my volunteer activities.

6) I further agree to release, hold harmless, and indemnify Bullies and Buddies, its Directors, Agents, Fosters, and Trainers from any and all claims, damages, and liability arising from my riding as a passenger in any vehicle owned or leased by Bullies and Buddies, its Directors, Agents, Fosters, or Trainers and operated by them.

7) I agree to allow photos of myself to be used, without compensation, for the purpose of promoting Bullies and Buddies.

8) In case of emergency, I authorize Bullies and Buddies to arrange medical treatment after attempting to notify the contacts listed below. Please list two personal contacts.

a) Name:
Phone:
Relationship to you:

b) Name:
Phone:
Relationship to you:

I REPRESENT THAT I AM OVER 18 YEARS OF AGE AND ACKNOWLEDGE THAT I HAVE READ THIS AGREEMENT CAREFULLY AND THAT I FULLY UNDERSTAND ITS CONTENTS AND IMPLICATIONS. I AM AWARE THAT THIS IS A WAIVER AND RELEASE OF LIABILITY AND INDEMNITY AGREEMENT, AND THAT IT IS BINDING AND ENFORCEABLE BY LAW.

Signature: _____ Date: _____

Print Name: _____

Bullies and Buddies Signature: _____

Print Name: _____ Date: _____

**BULLIES AND BUDDIES PARENT/GUARDIAN
RELEASE OF LIABILITY**

Child Volunteer's Name: _____

Age: _____

In addition to the above waivers and releases, I, the parent or guardian of the above named volunteer who is under the age of 18, do for myself, for the other parent of the child, and on behalf of my child volunteer hereby release, forever discharge, and agree to indemnify and hold harmless Bullies and Buddies, its Directors, Agents, Fosters, Trainers, and adoption venues from any and all liability, claims, or demands for personal injury, sickness, death, or property damage, including but not limited to, attorney fees and court costs, and any and all other liabilities which may be incurred by my child volunteer or which may arise from my child's volunteer activities with Bullies and Buddies.

Parent/Guardian signature: _____

Print name: _____

Date: _____

Bullies and Buddies signature: _____

Print name and Title: _____

Date: _____