



Name of Volunteer: _____ Gender (M, F, GN, TG) _____ Age: _____

Name of School/Group Organization (if applicable): _____

In consideration of the undersigned minor volunteer's (the "Volunteer") participation in volunteer work with the Oregon Humane Society ("OHS"), the Volunteer and his/her/their undersigned parent or legal guardian (the "Parent") execute this Waiver and Release, Consent and Authorization for Medical Care and Costs, Youth Volunteer Agreement, Transportation Agreement, and General Acknowledgment (collectively, the "Agreement") as of the date below. The Parent and the Volunteer understand that this Agreement includes, among other things, **a waiver of the ability to bring claims against OHS** as an entity and its past and present directors, officers, employees, representatives, volunteers, and agents, in both their individual and professional capacities (hereinafter, collectively, the "Released Parties") for any and all personal illnesses or injuries, damages, or losses relating to or arising from volunteering at OHS.

Waiver and Release

Understanding of Risk. The Parent and the Volunteer are aware that volunteering at an animal shelter, including working with shelter animals, can be hazardous. Animals are unpredictable and the shelter environment can be unsafe. Volunteer will be exposed to animal feces, allergens, and zoonotic diseases, which could pose risks to Volunteer and Volunteer's pets. **The Parent and Volunteer hereby acknowledge, understand, and assume the risks posed by volunteering at OHS, which could include, but are not limited to, death, illness, physical harm, mental harm, psychological harm, property damage, property loss, pet illness, pet harm, pet death, or any other damages.**

RELEASE AND WAIVER OF LIABILITY AND COVENANT NOT TO SUE. The Parent and the Volunteer recognize that OHS has granted the Volunteer the privilege of volunteering at OHS. In consideration of this privilege, the Parent, the Volunteer, and their heirs, executors, administrators, and assigns, hereby assume all the risks and dangers of the Volunteer's work at OHS and **forever release, acquit, and discharge the Released Parties from all present and future liability from any and all claims, demands, or causes of action (including costs and attorneys' fees) arising out of or in any way connected, whether directly or indirectly, to the Volunteer's work at OHS,** including, without limitation, **any and all claims arising in whole or in part out of the negligence of any one or more of the Released Parties or third parties.** It is the intention of the undersigned that this waiver and release cover all work performed by the Volunteer on behalf of OHS, whether it be on OHS property or with off-site volunteer activities such as OHSTAR, Adoption Outreach, Foster Care, Special Events, etc.

The undersigned Parent certifies that he/she has authority to waive liability on behalf of the minor Volunteer.

Parent Date: _____

Volunteer Date: _____

Consent and Authorization for Medical Care and Costs

Should an accident or other medical emergency occur while Volunteer is participating in the volunteer program at the OHS facilities, while en route to or from an OHS sponsored event, or at an off-site event, the Parent authorizes the Released Parties to seek, authorize, and obtain medical treatment for the Volunteer to the extent the Released Parties deem it necessary and appropriate.

The Parent will assume full responsibility for any and all costs, billings, and debts incurred as a result of medical treatment or services performed to treat injuries or illnesses associated with or occurring during the Volunteer's volunteering at OHS.

The Parent represents and warrants that Volunteer has personal or organizational health insurance while volunteering at OHS.

Emergency Phone Numbers

Home:

Work:

Cell:

_____ Date: _____
Parent

_____ Date: _____
Volunteer