

# Feathered Friends Forever

612 Byrd Drive  
Harlem, Georgia 30814  
Phone: (706) 556-2424  
www.featheredfriendsforever.org

## INDEMNITY WAIVER AND RELEASE OF LIABILITY FORM

I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN ANY AND ALL ACTIVITIES ASSOCIATED WITH FEATHERED FRIENDS FOREVER & BIRDS ON THE BRINK'S VOLUNTEER PROGRAM, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault. I certify that I am physically fit for this activity, and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems, which preclude my participation in this activity. I acknowledge that this Accident Waiver and Release of Liability Form will be used by FEATHERED FRIENDS FOREVER & BIRDS ON THE BRINK and any event holders, sponsors, and organizers of the activity in which I may participate, and that it will govern my actions and responsibilities at said activity. In consideration of my participation in this activity, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

(A) I WAIVE, RELEASE AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from this activity, THE FOLLOWING ENTITIES OR PERSONS: FEATHERED FRIENDS FOREVER & BIRDS ON THE BRINK and/or their directors, officers, employees, volunteers, representatives, and agents, and the activity holders, sponsors, and volunteers;

(B) INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this activity, whether caused by the negligence of release or otherwise. I acknowledge that FEATHERED FRIENDS FOREVER & BIRDS ON THE BRINK and their directors, officers, volunteers, representatives, and agents are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf.

I acknowledge that this activity may involve a test of a person's physical and mental limits and carries with it the potential for death, serious injury, and property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, vehicular traffic, lack of hydration, and actions of other people including, but not limited to, participants, volunteers, monitors, and/or producers of the activity. These risks are not only inherent to participants, but are also present for volunteers.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity.

I understand while participating in this activity, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the activity holders, producers, sponsors, organizers, and assigns. This Indemnity Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I recognize that working with parrots places me at physical risk, and I agree to assume that risk. I further understand that parrot behavior is unpredictable and that birds are capable of spreading disease and/or inflicting serious personal injury or death, as well as extensive property damage. Knowing the risks of handling parrots; nevertheless, I hereby agree to assume those risks and to release, indemnify and hold harmless FEATHERED FRIENDS FOREVER & BIRDS ON THE BRINK, its directors, officers, employees, volunteers, representatives, agents, activity holders and sponsors who might otherwise be liable to me (or my heirs or assigns) for damages.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS AN INDEMNITY WAIVER, RELEASE OF LIABILITY AND A CONTRACT THAT I SIGN OF MY OWN FREE WILL.

\_\_\_\_\_  
Participant's Full Name

Participant's Age: \_\_\_\_\_

\_\_\_\_\_  
Participant's Signature

Date: \_\_\_\_\_