

PARTNERS FOR PETS
***** VOLUNTEER WAIVER FORM *****

In signing this statement, I understand and agree to the following:

I, _____, agree to abide by the policies and procedures explained to me by Partners for Pets, Inc. during a voluntary activity and/or training period. I agree to serve as a member of the volunteer team at the discretion of Partners for Pets and will abide by the appropriate rules and regulations that apply to all volunteers. I agree to hold harmless Partners for Pets, Inc. and any of its agents, employees, directors, and insurance claims of every nature, damages or judgements in matters relating to my service as a volunteer. This includes but is not limited to personal injury.

Your name _____ AGE _____
Signature _____
Witness _____
Parent or Guardian (if under 18) _____
Address _____
Phone number _____

Emergency information and notification – please provide the name, address and telephone number of the person to reach in case of an emergency

Name _____ Phone _____
Address _____
Relationship to volunteer _____

Is volunteer currently under a Doctor's care? _____
Doctor's name _____ Phone _____