



FRANCES HALBROOK HENSLEY  
ANIMAL SHELTER INC.

## Volunteer Waiver of Liability

*Important: Each volunteer must sign the "Release and Waiver Liability" before working on at the Frances Hensley Animal Shelter. Read this waiver very carefully before you sign. Waiver applicable 1 year from date of signature.*

This release and Waiver of Liability (the "Release") executed on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ (volunteer) releases FRANCES HENSLEY ANIMAL SHELTER, a nonprofit corporation organized and existing under the laws of the State of Tennessee, USA and both of their directors, officers, employees, and agents (collectively, "FHHAS").

Volunteer understands that the scope of Volunteer's relationship with Nonprofit is limited to a volunteer position and that no compensation is expected in return for services provided by Volunteer; that Nonprofit will not provide any benefits traditionally associated with employment to Volunteer; and that Volunteer is responsible for his/her own insurance coverage in the event of personal injury or illness as a result of Volunteer's services to Nonprofit.

- Waiver and Release.** I, the volunteer, release and forever discharges and hold harmless FHHAS and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from the minor's volunteer work at FHHAS. The volunteer understands and acknowledges that this Release discharges FHHAS from any liability or claim that volunteer may have against FHHAS with respect of bodily injury, personal injury, illness, death, or property damage that may result from participation on the FHHAS worksite. It is also understood that FHHAS does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health or disability insurance in the event of injury, illness, death or property damage **Insurance.** The volunteer understands that we expressively waive any such claim for compensation or liability on the part of FHHAS beyond what may be offered freely by the representative of FHHAS in the event of such injury or medical expense.
- Medical Treatment.** The volunteer hereby release and forever discharge FHHAS from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during the volunteers time with FHHAS.
- Assumption of Risk.** The volunteer understands that their time with FHHAS may include activities that may be hazardous to them including, but not limited to, dog walking, working around wet floors, animals in general who at times can be unpredictable. We recognize and understand that the volunteers time with FHHAS may, in some situations, involve inherently dangerous activities. As the volunteer I hereby expressly assume the risk of injury or harm in these activities and release FHHAS from all liability for injury, illness, death or property damage resulting from the activities of the volunteers time at FHHAS.
- Photographic Release.** As the volunteer I grant and convey unto FHHAS all right, title, and interest in all photographic images and video or audio recordings made by FHHAS during the volunteers work with FHHAS.
- Other.** As the volunteer I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Tennessee in the United States of America, and that this Release shall be governed by and interpreted in accordance with the laws of the State of Tennessee. I agree that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall no otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

By signing below, I express my understanding and intent to enter into this Release and Waiver of Liability willingly and voluntarily.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date