



4 Paw Luv
Low Cost Spay/Neuter Clinic
A 501(c)3 NON-PROFIT ORGANIZATION
www.4pawluv.org (815) 712-6350

AGREEMENT TO RELEASE & HOLD HARMLESS

I, the undersigned, hereby release and hold harmless PetSmart Inc., The Anti-Cruelty Society, and 4 Paw Luv, heretofore to be known as 4 Paw Luv, including but not limited to their trustees, directors, officers, managers, volunteers, assistants, and assigns from any liability ensuing from any injury or damage to my person and/or any and all of my personal effects caused by any of the animals under the care of 4 Paw Luv, while at the adoption center sites (Woodfield/Schaumburg PetSmart and/or Barrington Road/Schaumburg PetSmart) or at any other site.

I understand that volunteering for 4 Paw Luv involves risk to me, including but not limited to scratches and bites from the animals, as well as injuries including but not limited to bumps, scrapes and bruises. I also understand that there is a possibility of contracting certain medical conditions including but not limited to ringworm and rabies. I am aware that handling animals can, in fact, cause serious injury.

I also recognize that by volunteering with 4 Paw Luv, there is a risk for my own pets contracting parasites such as fleas, worms and mites, and other medical conditions such as ringworm, respiratory infections, and other diseases.

I am hereby choosing to volunteer with 4 Paw Luv willfully and of my own volition, fully mindful of the known dangers and risks I am assuming in connection with these activities.

I further certify that I have medical insurance coverage and recognize that it will be my own responsibility for payment of medical expenses related to an illness, injury or accident while volunteering for 4 Paw Luv.

I hold PetSmart Inc., The Anti-Cruelty Society, and 4 Paw Luv harmless for any accidents or injuries, which may be caused by my own or another volunteer's negligence or carelessness.

Circle the capacity in which you are volunteering:

Veterinarian / Veterinarian Student

Vet Tech / Vet Tech Student

Other

Print Name

Date

Address

Phone

Email

Volunteer's Signature

Date

Parent's Signature (if under 18)

Date

4 Paw Luv Officer

Date