

RELEASE OF LIABILITY

(For Volunteers Under 18 Years of Age)

Read Carefully – This Affects Your Legal Rights

In exchange for participating in the activity of volunteering at the Mission Valley Animal Shelter, Polson, Montana (“MVAS”), performing various support duties including the feeding, watering of dogs and cats, exercising/walking dogs, socializing cats, bathing and brushing of dogs, brushing of cats, maintaining a clean, sanitary and healthy environment at the shelter’s facilities, performing light office duties, maintenance and/or repair of various facilities of the shelter premises and to performing any other activities that may be assigned to me from time to time by the MVAS Shelter Manager, _____ agree to the following:

1. I agree to observe and obey all posted rules and warnings and further agree to follow any and all instructions given by the Shelter Manager or employees of MVAS.
2. I recognize that there are certain inherent risks associated with the above described activities and I assume full responsibility for personal injury to myself and further release and discharge MVAS for injury, loss or damage arising out of my own acts and omissions relating to the service I am voluntarily providing to MVAS. I will disclose any physical or psychological limitations to the Shelter Manager before participating in any activity.
3. I agree to indemnify and defend MVAS against all claims, causes of actions, damages, judgment costs or expenses, including attorneys’ fees and other litigation costs, which may in any way arise from my use of or presence upon the facilities of MVAS.
4. I agree to pay for all damages to the facilities of MVAS caused by my or my family’s negligence, reckless or willful actions.
5. As a volunteer, I expressly agree that this Release of Liability is intended to be as broad and inclusive as permitted by the laws of the State of Montana and shall be governed and construed in accordance with the laws of the State of Montana. I agree that in the event that any clause or provision of this Release of Liability is deemed invalid, the enforceability of the remaining provisions of this Release of Liability shall not be affected.

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

Print Minor’s Name: _____ DOB: _____ Date: _____
Address: _____ Phone No. _____

PARENT OR LEGAL GUARDIAN’S ADDITIONAL INDEMNIFICATION

In consideration of _____ (“Minor”) being permitted by MVAS to participate in its activities as described herein, I agree to indemnify and hold harmless MVAS from any and all claims which are brought by, or on behalf of Minor or by any other family member, and which are in any way connected with the activities of Minor in connection with his volunteer actions for MVAS. The undersigned does hereby represent that he/she is acting in the capacity of parent or legal guardian of Minor. **I have read the Release of Liability and explained it thoroughly to Minor and agree to the above additional indemnification and agree to the terms of Release of Liability set forth above.**

Parent of Legal Guardian’s Signature _____
Print Name _____ Date _____