



## Volunteer Activity Liability Waiver

I, \_\_\_\_\_ (print name), hereby acknowledge and assume the risk of participation in any and all activities at Sun Cities 4Paws Animal Rescue shelter, thrift store, PetsMart, or any and all locations where 4Paws activities take place. I assume the risks of being bitten, scratched, injured, or frightened by animals in connection with my volunteer work for 4Paws. 4Paws, its officers, staff members, volunteers, advisors, property owners, and/or agents are not liable to me for any injuries, damages, liabilities, losses, judgments, costs or expenses whatsoever, which I might suffer or sustain in connection with my performance of volunteer activities for 4Paws, unless they are a result of 4Paws' gross negligence or intentional misconduct. I will indemnify, defend and hold 4Paws harmless from and against any claims, lawsuits, injuries, damages, losses, costs or expenses whatsoever, sustained by any companion animal or any person in connection with my intentional misconduct or grossly negligent performance of volunteer activities for 4Paws, or my breach of 4Paws' rules, regulations, policies and programs.

It is further agreed and understood I shall maintain in full force and effect, a policy of insurance covering medical treatment and all related costs in the event of injury to myself as a result of my participation in any and all activities at 4Paws. I also agree that if I don't maintain in full force and effect a policy of insurance, I am still liable for medical treatment and all related costs in the event of an injury to myself as a result of my participation in any and all activities involving 4Paws.

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Volunteer Signature & Date

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4Paws Representative & Date

### Emergency Information

Please notify the following individual(s) immediately in the event of a medical emergency.

Name	Relationship
Address	
City, State, Zip	
Phone Number (Day)	(Night)

Any special medical conditions or medications that emergency personnel should be aware of:

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