

Today's Date: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

I understand that Rez Dawg Rescue, Inc has taken all reasonable measures to protect me, and that even so, accidents and injuries may still occur. I realize that dogs are animals, and may bite, scratch or carry disease. They may also cause damage to my vehicle or personal property. Therefore, I hereby completely release and entirely discharge Rez Dawg Rescue, Inc from any and all claims and causes of action that I or another might have or bring relating to or arising from any injury or damage that I should sustain while assisting Rez Dawg Rescue, Inc or in connection with my volunteer work for Rez Dawg Rescue, Inc.

I certify that I have a valid Driver's License, active car insurance, and reliable transportation. I understand and agree that Rez Dawg Rescue, Inc is not liable for any injuries, damages, liabilities, losses, judgments, costs, or expenses whatsoever that I may suffer or sustain in connection with the performance of my volunteer activities, unless they are the result of Rez Dawg Rescue, Inc gross negligence (a carelessness and reckless disregard for the safety or lives of others, which is so great it appears to be almost a conscious violation of other people's rights to safety) or intentional misconduct.

I understand that because I may come in contact with animals, it is important to discuss being vaccinated against tetanus with my physician. I release Rez Dawg Rescue, Inc from all responsibility that may occur because of my not pursuing this matter further and I understand whatever decision I make is at my own risk. I have read, understand and agree to the above tetanus information.

My signature to this volunteer liability release form attests to my intent to hold harmless and release from all liability Rez Dawg Rescue, Inc or any of its past, present or future officers, agents, volunteers, employees or assigns, from all acts which are related to the normal performance of required and implied duties. My signature, whether original, by fax or any other electronic means, is valid as if it were an original signature.

To apply your electronic signature to this application, please type your full name and your e-mail address. \_\_\_\_\_

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