

Volunteer Waiver



Name

Date

Age 18+

Emergency Contact Name

Emergency Contact Phone

I understand that I will not be compensated monetarily for the work I do for Feline Friends of Sammamish as a volunteer.

I understand that the behavior of domestic animals is sometimes unpredictable and that some domestic animals are capable of inflicting serious personal injury or death, as well as extensive property damage. Know the risks of handling domestic animals, I agree to assume those risks and to release, indemnify and hold harmless Feline Friends of Sammamish, and/or its officials, directors, supervisors, or other volunteers for any and all personal injury and property damages resulting from my volunteer work.

I will report any accident or injury to my supervisor immediately so an accident/injury report can be filled out.

I have read, understood, and agree to the above.

Signature

Date