

Volunteer Contract & Liability Waiver



Volunteer's full name as listed on the volunteer or foster application: _____

Release of Liability

I recognize that working with animals including giant breed dogs, places me at physical risk, and I agree to assume that risk. I realize that although Save The Giants rescue has taken all reasonable measures to protect me, accidents and injuries may still occur. Therefore, I hereby completely release and entirely discharge Save The Giants rescue from any and all claims and causes of action of negligence or gross negligence that I or another might have or bring relating to or arising from any injury or damage that I should sustain while assisting Save The Giants rescue or in connection with my volunteer work for Save The Giants rescue.

Initial Here: _____

Understanding and Acceptance of Volunteer Guidelines

I have read, understand and agree to the volunteer guidelines set forth in the Save The Giants rescue Volunteer Handbook. I fully understand and agree that I am providing my services in a volunteer capacity without any expressed or implied promise of compensation. I agree to perform my volunteer duties to the best of my ability and to adhere to the guidelines detailed in the volunteer handbook. I further understand that my volunteer involvement may be terminated for reasons including, but not limited to, those outlined in the volunteer manual.

Initial Here: _____

Photo Release

During my volunteer time with Save The Giants rescue, I understand my photo may be taken at various events and projects. By signing below I also hereby grant Save The Giants rescue permission to use my likeness in photograph(s) and/or video(s) in any and all of its publications or online, whether now known or hereafter existing. I will make no monetary or other claim against Save The Giants rescue for the use of the photograph(s) and/or video(s).

Initial Here: _____

By signing below, I hereby acknowledge that I understand and will comply with the provisions of this contract and liability waiver.

Printed Name (Volunteer) _____ Signature _____ Date _____

Street Address _____ City _____ State _____ Zip _____

Primary Phone # _____ Alternate Phone # _____ Email address _____