



## Adult Volunteer Liability Waiver & Agreement

Volunteer Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Emergency Phone: \_\_\_\_\_

I understand that volunteering with the Humane Society of St. Thomas involves inherent risks, including but not limited to animal bites, scratches, kicks, zoonotic diseases, allergic reactions, falls, lifting injuries, and other injuries that may occur when working around animals, shelter equipment, cleaning products, or shelter property.

I understand that animals are unpredictable and may react unexpectedly despite reasonable precautions.

I understand and acknowledge that this waiver and release applies to all volunteer activities, programs, events, services, animal interactions, transportation, and participation associated with the Humane Society of St. Thomas, whether occurring on Humane Society property or at any off-site location, including but not limited to community events, adoption events, fundraising events, transport activities, outreach programs, foster-related activities, and any other authorized shelter-related function or activity.

By signing this agreement, I acknowledge and agree to the following:

1. I voluntarily assume all risks associated with volunteering at the Humane Society of St. Thomas.
2. I agree to follow all staff instructions, safety procedures, animal handling protocols, and restricted-area rules at all times.
3. I understand that failure to follow shelter policies or staff direction may result in immediate dismissal from the volunteer program.
4. I understand that I should not handle any animal unless authorized and trained to do so.
5. I release and hold harmless the Humane Society of St. Thomas, its Board of Directors, officers, employees, veterinarians, agents, and volunteers from any and all claims, injuries, damages, losses, liabilities, or expenses arising from or related to my participation as a volunteer, except where prohibited by law.
6. I authorize emergency medical treatment in the event of illness or injury if I am unable to provide consent myself.
7. I understand that the Humane Society of St. Thomas is not responsible for loss or damage to my personal property.
8. I grant permission for photographs or video taken during volunteer activities to be used for shelter-related promotional or educational purposes unless I provide written notice otherwise.
9. I agree to maintain confidentiality regarding shelter operations, adopters, donors, staff matters, and veterinary or animal-related information not intended for public release.
10. I understand that volunteering is at-will and may be terminated by either party at any time.

I certify that I am at least 18 years of age and have read and understand this agreement.

Volunteer Signature: \_\_\_\_\_

Date: \_\_\_\_\_