



Minor Volunteer Liability Waiver & Parent/Guardian Consent

Minor Volunteer Name: _____

Age: _____ Date of Birth: _____

Parent/Guardian Name: _____

Address: _____

Phone: _____ Email: _____

Emergency Contact (if different): _____

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 associated with working around animals, shelter equipment, cleaning products, and 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, both the minor volunteer and parent/guardian acknowledge and agree to the following:

1. The minor volunteer agrees to follow all staff instructions, safety rules, and animal handling procedures at all times.
2. The minor volunteer understands they may not handle certain animals or enter restricted areas unless specifically authorized by staff.
3. The parent/guardian understands and accepts the risks associated with participation in volunteer activities.
4. The parent/guardian releases and holds harmless the Humane Society of St. Thomas, its Board of Directors, officers, employees, veterinarians, agents, and volunteers from any claims, injuries, damages, losses, liabilities, or expenses arising from participation in volunteer activities, except where prohibited by law.
5. The parent/guardian authorizes emergency medical treatment for the minor volunteer if necessary.
6. The parent/guardian understands that the Humane Society of St. Thomas is not responsible for loss or damage to personal property.
7. Permission is granted for photographs or video taken during volunteer activities to be used for shelter-related promotional or educational purposes unless written notice is provided otherwise.
8. The parent/guardian understands that volunteer participation may be terminated at any time for safety concerns, policy violations, or failure to follow staff direction.
9. Volunteers under the age of **16** must be accompanied by a parent or approved adult unless otherwise authorized by shelter management.

I certify that I am the parent/legal guardian of the above-named minor and authorize participation in volunteer activities.

Minor Volunteer Signature: _____

Date: _____

Parent/Guardian Signature: _____

Date: _____