



**SMITH COUNTY VOLUNTEER PROGRAM
GENERAL RELEASE/AGREEMENT
FOR SMITH COUNTY ANIMAL SHELTER VOLUNTEERS**



MY SIGNATURE INDICATES THAT I HAVE READ AND UNDERSTAND THE INFORMATION BELOW.

I am above the age of 18, and in the exchange for permission to participate in the Smith County Volunteer Program, I expressly agree to abide and use reasonable care, and I understand that such activities may have an element of hazard or inherent danger and I take full responsibility for my actions and physical condition. I agree that participation in the program does not give any authority to act as an agent, employee or representative of Smith County or the Animal Shelter in any way. I also agree to maintain confidentiality of any information I may gain through participation in this program. I hereby for myself, my heirs, executors and administrators agree to indemnify and hold Smith County and the Animal Shelter and its employees, representatives, successors and assigns harmless from any liability, loss, cost or expense (including attorney's fees, medical and ambulance costs) that may occur while participating. In case of emergency, I give my permission for emergency medical treatment. This form shall be considered valid until canceled or changed in writing by the undersigned participant.

All Volunteer Applications/background checks must be approved before the volunteer can begin service.

The Smith County Animal Shelter is not liable for any damage or theft to Volunteer's property. Personal property is the sole responsibility of the person to whom it belongs.

The Smith County Animal Shelter is not liable for any personal injury, and/or illness to Volunteer, volunteer's family, or anyone that may be accompanying them during their volunteer time. I agree to hold the Shelter harmless for any injurious act the animal(s) may commit.

I agree to treat all animals with care and concern. I agree to treat ALL Smith County staff in a courteous and respectful manner. I understand that any volunteer may be asked to leave if they violate this agreement.

Date: _____

Participant: _____

Signature: _____

PHOTO RELEASE

I, _____, give my permission for the Smith County Volunteer Program to use my photograph for promotional purposes including, but not limited to, social media sites such as Facebook, Instagram and Twitter and our website.

Signature

Date

Printed Name

FaceBook address/name: _____

Instagram: _____

Twitter: _____