



Group: _____

Date: _____

Group Volunteer Release and Sign-In

Thank you for spending your time volunteering with us! We really appreciate you!

By signing this agreement, I hereby agree to accept a position as a volunteer worker for the HUMANE SOCIETY OF TAMPA BAY, INC. (hereinafter referred to as the "Humane Society"), and in so doing, I agree to comply with all of the rules and regulations which may be established from time to time by the Humane Society, and I understand that failure to do so may result in my immediate termination as a volunteer. I acknowledge that my services are provided strictly on a volunteer basis, without any pay or compensation of any kind, and without liability of any nature on behalf of the Humane Society, all services to be performed by me at my own risk. I recognize that in handling animals and performing other volunteer tasks, there exists a risk of injury, including physical harm, caused by the animals. On behalf of myself, my heirs, personal representatives and executors, I hereby release, discharge, indemnify and hold harmless the Humane Society, its agents, servants, and employees from any and all claims, causes of action, or demands, of any nature or cause, including costs and attorney's fees incurred by the Humane Society in connection with the same, based on damages or injuries which may be incurred or sustained by me in any way connected with my services for the Humane Society, including, but not limited to animal bites, accidents or injuries. I understand that public education is an important function of the Humane Society. On behalf of myself, my heirs, personal representatives and executors, I allow the Humane Society to use any photographs taken of me for use in public education efforts.

Printed Name:	Signature:	Would you like to receive our newsletter?	
Email:		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Printed Name:	Signature:	Would you like to receive our newsletter?	
Email:		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Printed Name:	Signature:	Would you like to receive our newsletter?	
Email:		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Printed Name:	Signature:	Would you like to receive our newsletter?	
Email:		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Printed Name:	Signature:	Would you like to receive our newsletter?	
Email:		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Printed Name:	Signature:	Would you like to receive our newsletter?	
Email:		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Printed Name:	Signature:	Would you like to receive our newsletter?	
Email:		<input type="checkbox"/> YES	<input type="checkbox"/> NO