VOLUNTEER WAIVER OF LIABILITY

In consideration of the Humane Society of Marathon County, Inc. accepting my application for participation in the Volunteer Program, I agree to release and hold harmless the Humane Society of Marathon County, Inc., its Directors, Officers, Agents and Employees from and against any and all loss, damage, claims, liability, costs and expense, of any nature whatsoever, including without limitations, attorney's fees and disbursements arising from or occasioned by my participation in the Humane Society of Marathon County, Inc. Volunteer Program.

I understand there are certain risks of person injury, death, disease and property damage in handling the animals and other volunteer activities on behalf of the Humane Society of Marathon County, Inc. and I accept those risks.

I agree that the Humane Society of Marathon County, Inc. may photograph my participation in this program and I hereby release any such photographs to the Humane Society of Marathon County, Inc. for use in its programs, publications and purposes.

Signature Date _____

Parent/Guardian Signature if under 18/yr of age	
requirements and confidenti of HSMC; ✓ To meet time and duty requi	rocedures, including record-keeping ality of the agency and client information
Agreed to: Signature	Date
Office Use: Humane Society Manager/Staff Signatu	uro.
Humane Society manageristaji Signa <u>ture</u>	

Date_____