

Liability Waiver

I, the individual named herein below, acknowledge and understand that working with animals may be dangerous and can lead to serious injury or even death. Furthermore, I understand and agree to personally assume any and all liability and risks of volunteering at Lampasas Animal Shelter, hereafter referred to as the Shelter.

In consideration of this agreement to allow me to participate in its volunteer program at the shelter, I agree to indemnify and hold harmless the Shelter, its officials, agents, representatives, employees, officers, and representatives from every penalty, cause of action, claim, loss, cost, damage, attorney's fees, lien and/or expense arising out of or resulting from my performance of volunteer work at the shelter, volunteer work performed off-site for the shelter, or for any failure of observance of all rules, regulations or policies of the Shelter. The Shelter shall not be liable for damages to me arising from any act of any third party or animal. I further agree to indemnify and save harmless the Shelter from and against all claims of whatever nature arising from any of my future negligent acts, omissions or negligence, or arising from any accident, injury, or damage whatsoever caused to any person, animal or to the property of any person occurring while I am providing volunteer work at the Shelter, or arising from any accident, injury, or damage occurring on Shelter property.

I understand and agree that as a volunteer, I am not an employee of Lampasas Animal Control or the Shelter, and I am not entitled to any compensation or benefits of any kind, except as otherwise required by law.

By signing below, I hereby agree that I will not object to or challenge the protocols and procedures outlined by the Shelter Supervisor. This includes, but is not limited to: not entering unauthorized areas, not touching animals that are in unauthorized due to the risk of transmitting contagious disease to other animals, not bringing cameras on the premises unless directly asked by Shelter Supervisor, and not representing yourself as an employee of the Shelter. Violation of any of these guidelines is grounds for immediate removal from the premises and termination of all future volunteer opportunities with this Shelter.

Please note that your acceptance into, and continued participation in, the volunteer program is, among other things, dependent on your attitude towards volunteer work, your comfort level working with animals, your attitude toward animal shelters and our specific activities, and whether we have positions available for you specified time slots.

Printed Name: _____

Signature: _____

Legal Guardian: _____

VOLUNTEER STATEMENT OF PHYSICAL CONDITION
AND
NON-USE OF DRUGS AND ALCOHOL

I, _____, confirm that based upon my personal knowledge and information available to me, I am in satisfactory physical condition to adequately perform all of the job responsibilities required for volunteering at the City's Animal Shelter. Further, I attest that I am fully capable of performing these job duties without endangering either my health and/or physical condition or the health and safety of the Animal Control Employees or the animals sheltered at the facility.

I further understand that, if at any time during my participation as a volunteer with the City's Animal Shelter, I have reason to believe that my physical health or condition has changed so that I am no longer fit to fully and satisfactorily perform all of my job functions, it is my duty to report that immediately to the Animal Control Supervisor.

Additionally, I hereby attest that I do not use non-prescribed (i.e., recreational) drugs and I am aware that my use of these substances is against the City's policy. Any credible report of use of drugs or alcohol while volunteering with the City may be investigated without notice to me and without my permission, as the City deems appropriate.

I understand that concealing or misrepresenting information about my physical condition and/or non-use of non-prescribed or illegal drugs or being under the influence of alcohol by me is grounds for immediate termination of volunteering.

Volunteer Signature _____
Date

(Must be signed by parent if under 18 years of age)

I have reviewed the statement given by my son/daughter, above, and concur with the contents and statements made therein.

Parent(s) Signature _____
Date

Date: _____

Shelter Supervisor: _____ Approve Decline

Assistant Chief of Police: _____ Approve Decline

City Manager: _____ Approve Decline