



Fairy Tails, Inc. – 305.596.9694 - www.fairytailsadoptions.com

VOLUNTEER AGREEMENT AND RELEASE

I, _____ agree to release, discharge, indemnify, and hold harmless Fairy Tails, Inc. for any and all damage to my personal property while performing my volunteer services with Fairy Tails, Inc. in a volunteer capacity.

I recognize that in handling animals with Fairy Tails, Inc. while performing my volunteer services, there exists a risk of injury, including personal physical harm. On behalf of myself, my heirs, my personal representatives and executors, I hereby release, discharge, indemnity and hold harmless Fairy Tails, Inc., its agents, servants, and employees from any and all claims, causes of action or demands, of any nature or cause connected with my Volunteer Agreement and Release. This might include costs and attorneys' fees and court costs incurred by Fairy Tails, Inc. in connection with my volunteer services based on damages or injuries which might be incurred or sustained but are not limited to animal bites, scratches, accidents, injuries and personal property damage.

I understand that public relations is an important part of volunteering with Fairy Tails, Inc. I, therefore, agree on behalf of myself, my heirs, my personal representatives, and my executors, to allow Fairy Tails, Inc. to use any photographs taken of me for use in public relations efforts. Fairy Tails, Inc. will use reasonable efforts to notify me before use, but such notification is not a condition of photographs being released for public relations purposes.

I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE TERMS AND CONDITIONS OF THE FOREGOING VOLUNTEER AGREEMENT AND RELEASE AND THAT I WILL COMPLY WITH SAME.

Volunteer's Name (Please Print) **Volunteer's Signature** **Today's Date**

Volunteer's Phone # **Volunteer's Email Address** **Fairy Tails Representative**

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PARENT OR LEGAL GUARDIAN (if under 18 years of age)

As a parent or legal guardian of the above-mentioned volunteer, I hereby give my consent to allow my child/ward to volunteer services with Fairy Tails, Inc. as described within this Volunteer Agreement and Release. I have read this **Volunteer Agreement and Release** and fully understand its terms and conditions. On behalf of my child/ward and myself, I agree to all terms and conditions as set out in the Volunteer Agreement and Release.

Parent/Guardian's Name (Please Print) **Signature** **Today's Date**

Fairy Tails, Inc. Representative **Fairy Tails Rep's Signature** **Today's Date**