



**VOLUNTEER RELEASE FORM**  
Halifax Humane Society

I, \_\_\_\_\_ hereby agree to accept a position as a volunteer worker for the Halifax Humane Society (hereinafter referred to as HHS), and in so doing, I agree to comply with all of the rules and regulations which may be established from time to time by HHS. 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 HHS, 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 HHS, its agents, servants, and employees from any and all claims, causes of action, or demands, of any nature or cause including costs and attorneys fees incurred by HHS 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 HHS, including but not limited to animal bites, accidents, or injuries.

Date: \_\_\_\_\_ Volunteer Signature: \_\_\_\_\_

Witness: \_\_\_\_\_

I, \_\_\_\_\_ understand that public relations is an important part of volunteering at HHS. On behalf of myself, my heirs, personal representatives and executors, I allow the shelter to use any photographs taken of me for use in public relations efforts.

Date: \_\_\_\_\_ Volunteer Signature: \_\_\_\_\_

Witness: \_\_\_\_\_