Lumberjack Animal Rescue - Volunteer Release & Waiver of Liability

I,	_, acknowledge that this Release and Waiver of Liability (hereinafter
(Print Full Legal Name)	,

referred to as "Release") is intended to make me aware that there are potential risks inherently associated with volunteering for Lumberjack Animal Rescue, a 501(c)3 nonprofit organization (hereinafter referred to as "LJR"). I also acknowledge that this Release is intended to release LJR from any and all liability associated with these inherent risks. I desire to provide voluntary services for LJR, and I understand that LJR will not provide any benefits that may be traditionally associated with employment to me for these voluntary services. In consideration of being permitted to volunteer for LJR, I, the undersigned, hereby acknowledge and agree to the following:

- 1) Waiver: I do hereby agree to release, indemnify and forever discharge and hold harmless LJR, all of its directors, officers, employees, and agents, as well as its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from the services I provide to LJR. I understand and acknowledge that this Release discharges LJR from any liability or claim that I may have against LJR with respect to bodily injury, personal injury, illness, death or property damage that may occur while I am providing services to LJR or as a result of the services that I provide to LJR.
- 2) **Insurance**: Further I understand and agree that LJR does not assume any responsibility for or obligation to provide me with financial or other assistance, including but not limited to medical, health, or disability benefits or insurance of any nature in the event of my injury, illness, death or damage to my property. I expressly waive any such claim for compensation or liability on the part of LJR beyond what may be offered freely by LJR in the event of such injury or medical expenses incurred by me.
- 3) **Medical**: I hereby release and forever discharge LJR from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during my tenure as a volunteer with LJR. I understand that I am responsible for my own insurance coverage in the event of injury, illness, or even death as a result of my services to LJR.
- 4) Assumption of the Risk: I understand that the services I provide to LJR may include inherently dangerous activities that may be hazardous to my health. These activities may include, but are not limited to, sweeping, mopping and other general cleaning of the facility and/or kennels, pruning and clearing shrubs, weeds and/or brush and other general maintenance of the landscape, walking dogs and other general basic care of the animals. As a volunteer, I hereby expressly assume the risk of injury, which may include but is not limited to, being bit or otherwise seriously injured by an animal, the risk of illness and/or even the risk of death from these activities. I do hereby release, indemnify and forever discharge and hold harmless LJR, all of its directors, officers, employees, and agents, as well as its successors and assigns, from any and all liability for injury, illness, death or property damage that may occur while I am providing services to LJR or as a result of the services that I provide to LJR.
- 5) **Photographs/Media**: I grant and convey to LJR all right, title and interests in any and all photographs, images, video or audio recordings of me or my likeness or voice made by LJR in connection with my providing volunteer services to LJR.

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I understand and expressly agree that this Release is an agreement that shall be binding upon my heirs, administrators, executors, and assigns. I understand and expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Louisiana and that this Release shall be governed by and interpreted in accordance with the laws of the State of Louisiana. I also understand and expressly agree that in the event any clause or provision of this Release is deemed invalid, the enforceability of the remaining provisions of the Release shall not be affected.

By my signature below, I acknowledge that I have read and understand all of the terms of this Release and that I understand that I am giving up substantial rights, including the right to sue. By my signature below, I also express my understanding and intent to enter into this Release, freely, willingly and voluntarily and that I have attained the age of majority as set forth by the State of Louisiana.

VOLUNTEER SIGNA	ΓURE		DATE	
PRINT Volunteer's Ful	ll Legal Name			
GUARDIAN SIGNATU	JRE (if volunteer	· is underage)	DATE	
PRINT Guardian's Ful	l Legal Name			
VOLUNTEER CONTA	ACT INFORMAT	ΓΙΟN:		
Street Address				
City	ST	Zip		
()				
Phone				
Email				