

CARE for Animals, Inc., P.O. Box 7604, Little Rock, AR 72217 (501) 603-2273 www.careforanimals.org

CARE Volunteer Form

Name:		
Address:		
City:	State:	Zip:
Telephone Number:		
Email Address:		
	RELEASE OF LI	<u>IABILITY</u>
Arkansas Rescue Effort for Animalinescues animals from shelters and know the temperament of the animaggressive behavior. In addition, a aggressive tendencies that would my volunteer work with CARE, incread this waiver and knowing thesfor CARE, I, for myself and anyone Rock Animal Services, their respections of any kind arising out of out of negligence or carelessness	s, Inc. (CARE) is a as strays and spa mals it rescues or mimals placed tog not otherwise be luding, but not ling se facts, and, in continuous entitled to act or tive officers, direct my CARE volunters on the part of the	potentially hazardous activity. Central non-profit charitable corporation that ays/neuters cats and dogs. CARE does not r spays/neuters, and animals could exhibit gether in a display situation could exhibit apparent. I assume all risks associated with mited to, the risks of animal's bites. Having onsideration, of being allowed to volunteer in my behalf, waive and release CARE, Little ectors and representatives from all claims or eer activities even though liability may arise e persons named in this waiver. I grant graphs, motion pictures, recordings or any see.
Printed Name	Signatur	re
		

Date

Parent's Signature (If Volunteer less than 18 years old)