



VOLUNTEER AGREEMENT

First Name: _____ Last Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Email Address: _____

Occupation: _____

Volunteer position you are interested in: _____

Total hours per week are you available to volunteer: _____

How did you hear about us (if by a specific person, please identify): _____

RELEASE OF LIABILITY

I have read and fully **understand** the Rescue Angels, Inc. Volunteer Agreement: _____(initial)

I **understand** that I am subject to a background check by Rescue Angels, Inc. at any time during my term: _____(initial)

There have been no other representations or promises other than those included in this Volunteer Agreement: _____(initial)

I **understand** that all volunteer work done with Rescue Angels, Inc. is done at my own risk: _____(initial)

I certify that all information on my Rescue Angels, Inc. volunteer agreement is accurate: _____ (initial)

I, hereby for myself, my heirs, administrators and assigns, fully, irrevocably and unconditionally release and agree to hold harmless Rescue Angels, Inc. and its individual members from any and all known or unknown, anticipated or unanticipated, suspected or unsuspected and/or fixed, conditional or contingent, actions, causes of action, charges, suits, debts, demands, claims, contracts, covenants, liens, rights, liabilities, losses, royalties, costs, expenses (including, without limitation, attorneys' fees) or damages, including but not limited to any medical costs, damages to property, persons or other pets, of every kind, nature and description, at law or in equity, in connection with or arising from while I am volunteering for Rescue Angels, Inc.

Print Name

Date

Sign Name