

SPCA of Wake County
FOSTER VOLUNTEER REGISTRATION

If you would like to become an ongoing SPCA Foster Care Volunteer, please fill out and submit this form.

Name: _____

Address: _____

City, State Zip _____

School (if student) or Employer: _____

Phones: (cell) _____ (other) _____

Email address: (please print clearly!) _____

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Emergency Contact:

Name: _____ Relationship: _____

Phones: (cell) _____ (other) _____

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IMPORTANT - Read and Sign:

Volunteer Assumption of Risk, Waiver, and Indemnity Agreement on the reverse side of this form.

SPCA of Wake County
Volunteer Assumption of Risk, Waiver, and Indemnity Agreement
(please sign both)

USE THIS FORM FOR AGE 18 AND OLDER

Printed Name of Volunteer: _____

I confirm I am 18 years of age or older: _____ **(initial here)**

ASSUMPTION OF RISK ACKNOWLEDGMENT

I am volunteering to assist the Society for the Prevention of Cruelty to Animals (SPCA) of Wake County to further its missions of protecting, sheltering, and promoting the adoption of homeless animals and providing education about responsible pet ownership.

By initialing here: _____. I agree that I will adhere to the rules and regulations of SPCA of Wake County as provided to me and that I will follow direction given by staff.

As a volunteer, I may choose to engage in tasks that include but are not limited to assisting with animal care, handling, and medical treatment; cleaning or preparing animal environments; and transporting animals and/or supplies to off-site events. I understand and accept that interacting with animals, preparing and cleaning animal environments, and performing labor on or off SPCA premises may expose me to certain unavoidable risks, including personal injury through direct contact with animals, illness, and disease. I choose to participate in SPCA Volunteer activities in spite of these risks and hereby assume all risk of injury or illness to myself arising out of or related to my participation in SPCA Volunteer activities.

Signature of Volunteer: _____ Date: _____

WAIVER AND INDEMNITY AGREEMENT

WAIVER: In exchange for SPCA of Wake County furnishing me with services and equipment to enable me to participate in Volunteer activities, I specifically waive, release, and forever discharge SPCA of Wake County, as well as its directors, managers, officers, agents, and employees from all liability or claims for any injury, illness, or loss of or damage to property that I may suffer that arises out of or is related to my Volunteer activities. This release specifically includes, but is not limited to, liability or claims for injury, illness, or damage caused by the negligence of SPCA of Wake County, as well as its directors, managers, officers, agents, volunteers, and employees.

INDEMNITY: I agree to indemnify and hold harmless SPCA of Wake County, as well as its directors, managers, officers, agents, and employees, from any and all claims, demands, actions, and judgments arising out of or related to my participation as a Volunteer.

I HAVE READ THIS DOCUMENT CAREFULLY AND I UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND AN AGREEMENT TO INDEMNIFY AND I SIGN IT VOLUNTARILY.

Signature of Volunteer: _____ Date: _____

Please complete and return to: Director of Volunteer Services, SPCA of Wake County, 200 Petfinder Lane, Raleigh, NC 27603
You can also email a full-sized PDF to navissar@spcawake.org or fax to 919-772-2482.