

Tranquility Trail Animal Sanctuary

7848 East Redfield Road, Ste 7 ~Scottsdale, AZ 85260 ~ Corporate Office: 480-406-7301

Permission and Release of Liability

In consideration of Tranquility Trail Animal Sanctuary (TTAS) offering this volunteer opportunity, I/We agree to the following, intending to be legally bound:

1. Whenever I participate in TTAS activities, I hereby release, and agree to indemnify, defend and hold harmless TTAS, its director, officers, employees, agents, volunteers, its personal representatives and the owner's of the property on which TTAS is located, from and against liability for any injuries, damages, liabilities, losses, judgments, costs and expenses whatsoever (the Losses), which I or any pet or other person accompanying me might suffer or sustain, except any Losses which are the result of TTAS's gross negligence or intentional misconduct.
2. I acknowledge that there are risks that I could be bitten, scratched, injured or frightened by the animals or otherwise injured while working at TTAS and I assume such risks. Injury may include but are not limited to animal bites, scratches, cuts, falls, burns, insect bites, bee stings, sprains and broken bones. TTAS does not carry medical insurance for staff or volunteers, and I acknowledge that any medical care required as a result of an injury which occurs at the sanctuary or while I am representing TTAS at any other location, will be my financial responsibility. I further acknowledge that I will not operate any machinery or power tools while working at TTAS without the express consent of a TTAS officer, and that I will use all recommended safety equipment (safety glasses, gloves, etc.) and follow all safety precautions while operating any such equipment.
3. I have accurately and truthfully completed this Release Form.
4. This Permission and Release Form is binding upon me, my spouse/partner and my and his or her respective heirs, successors, assigns, executors and personal representatives.

If volunteering with children (Must be completed for volunteers under 18 years of age):

5. My/our child or children, or child or children under my guardianship, has/have enough experience with animals and is/are mature enough to volunteer with TTAS and to participate in activities with animals of all sizes.
6. Whenever my/our children, or child/children under my/our legal guardianship, participate in TTAS activities, I/We hereby release and agree to indemnify, defend and hold harmless TTAS, its directors, officers, employees, agents and volunteers, and its heirs, successors, assigns and personal representatives and owners of the property on which TTAS is located from and against liability for any injuries, damages, liabilities, losses, judgments, costs or expenses whatsoever (Losses), which such child or children or any pet or other person might suffer or sustain, except Losses which are the direct result of TTAS gross negligence or intentional misconduct.
7. I acknowledge that there are risks that the child/children could be bitten, scratched, injured or frightened by the animals or otherwise injured while working at TTAS and I assume such risks. Injury may include but are not limited to animal bites, scratches, cuts, falls, burns, insect bites, bee stings, sprains and broken bones. TTAS does not carry medical insurance for staff or volunteers, and I acknowledge that any medical care required as a result of an injury which occurs at the sanctuary or while I am representing TTAS at any other location, will be my financial responsibility. I further acknowledge that I will not operate any machinery or power tools while working at TTAS without the express consent of a TTAS officer, and that I will use all recommended safety equipment (safety glasses, gloves, etc.) and follow all safety precautions while operating any such equipment.

Adult/Parent/Guardian

Spouse/Partner

Signature: _____ Signature: _____

Print Name: _____ Print Name: _____

Address: _____

Contact Phone: _____ Emergency Phone: _____

Date: _____ Email Address: _____

Child's Name: _____ Age: _____

Child's Name: _____ Age: _____

Child's Name: _____ Age: _____