



Volunteer Printed Name: _____

Age: (check one): _____ Minor (15-17) _____ Adult (18 & over)

*All volunteers must be age 15 or greater to be an MAHS volunteer

RELEASE OF LIABILITY:

In joining the Marion Area Humane Society, as a volunteer, I, for myself, my heirs, executors and administrators, waive and release all rights and claims to damage I may have against MAHS or their Representatives for any injuries suffered by me, or any minors under my supervision, while I am a volunteer at MAHS. I attest that I am physically fit and that my personal health can be verified by a physician. I understand I must abide by the rules of the shelter and that if I disobey MAHS rules I may be asked to cease my work as a volunteer.

I acknowledge that I am aware that my picture or my child's picture may be taken during the course of volunteering for the humane society. I give permission to the Marion Area Humane Society (MAHS) to utilize any pictures or video taken of me or the minor child that I am signing for, to use in advertising or promoting the MAHS to the public.

I do not give permission, for MAHS to utilize any picture or video of me or of the child I am responsible for, to be used in any manner.

Volunteer Signature: _____ Date: _____

If volunteer ages 15-17 then signature of Parent/guardian required:

Signature of Parent / Guardian: _____ Date: _____

Acceptance of Volunteer Manual and Non-Disclosure Agreement

I acknowledge that I have received a copy of the Marion Area Humane Society Volunteer Manual. I have read and understand the contents of this manual and will act in accordance with these policies as a condition of my volunteering with the Marion Area Humane Society.

I understand that if I have questions or concerns at any time about the volunteer manual, I will consult with the volunteer coordinator or shelter staff.

I understand that any information I obtain or am given from MAHS is strictly confidential. I understand that I am not to improperly use or disclose any confidential information about the Marion Area Humane Society.

Volunteer Signature: _____ Date: _____

If volunteer ages 15-17 then signature of Parent/guardian required:

Signature of Parent / Guardian: _____ Date: _____