



NESAA
 P.O. Box 1041
 Osterville, Ma 02655
 508-221-4956
www.nesaa.org

NEW ENGLAND SOCIETY FOR ABANDONED ANIMALS, INC.
RELEASE AND WAIVER OF LIABILITY

In consideration of participating in any activity of New England Society for Abandoned Animals, Inc. (together with its directors, officers, successors, agents and assigns, "NESAA", PETSMART or PETSMART CHARITIES), including any work, travel, volunteer participation or other activities (the "Activities") run, sponsored and/or held by NESAA, PETSMART or PETSMART CHARITIES .

I, _____ hereby freely, voluntarily and without duress execute this Release and Waiver of Liability. I understand that the Activities may include, among other things, working directly with, and handling, stray, feral, abandoned and other animals, veterinary medicines and equipment and other substances used in the care of animals, as well as transporting animals to and from various locations as necessary by self automotive vehicle or NESAA owned vehicle or other means of travel.

RELEASE AND WAIVER. I do hereby release and forever discharge, hold harmless and agree to indemnify NESAA and PETSMART or PETSMART CHARITIES from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from my Activities with NESAA or PETSMART or PETSMART CHARITIES. I understand that this Release discharges NESAA, PETSMART, PETSMART CHARITIES from any liability or claim I may have against NESAA, PETSMART or PETSMART CHARITIES with respect to any bodily injury, personal injury, illness, death or property damage or vehicle damage that may result from my Activities with NESAA, PETSMART or PETSMART CHARITIES, whether caused by the negligence of NESAA, PETSMART or PETSMART CHARITIES, as a result of my participation in the Activities, I will indemnify, defend, save and hold NESAA , PETSMART, PETSMART CHARITIES harmless from any loss, liability, damage or cost which may be incurred as the result of such claim. I understand that NESAA, PETSMART and PETSMART CHARITIES does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance in the event of injury or illness.

MEDICAL TREATMENT. I do hereby release and forever discharge NESAA, PETSMART & PETSMART CHARITIES from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment or service rendered in connection with my Activities with NESAA, PETSMART or PETSMART CHARITIES.

ASSUMPTION OF RISK. I understand that working with stray, feral, abandoned, injured, sick or other animals, and other aspects of the Activities may be hazardous. I hereby expressly and specifically assume the risk of injury or harm from the Activities and release NESAA, PETSMART and PETSMART CHARITIES from all liability for injury, illness, mental duress, death or property damage resulting from the Activities.

KNOWING AND VOLUNTARY EXECUTION: I acknowledge that I have carefully read and fully understand the contents and legal ramifications of the Release. I understand this is a legally binding and enforceable contract and sign it of my own free will. I agree that if any portion of this Release is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

 Signature Date
 (21 Years of Age and Older) (Parent or Guardian if under 21)
 FULL NAME: (PRINT) _____ Phone: _____
 ADDRESS: _____ E-Mail: _____

(UNDER 16- MUST BE ACCOMPANIED BY A PARENT OR GUARDIAN)****OR***** (16 to 18 must have Parent Signature below)
 I authorize my child _____ Age _____ to Volunteer for NESAA.
 PARENT (print) _____ PARENT SIGNATURE _____