

Important: Each volunteer must read and sign the "Release and Waiver of Liability" before volunteering for The Pet Adoption Center of Orange County (PACOC). Please complete this form and hand it to a PACOC representatives before you volunteer.

Waiver of Liability

This Waiver of Liability (the "Waiver") executed on this _____ day of _____, 20____, by _____ (the "Volunteer") in favor of The Pet Adoption Center of Orange County, a nonprofit corporation organized and existing under the laws of the State of California, USA, and all of their directors, officers, employees, and agents (collectively, "PACOC").

I, the Volunteer, desire to work as a volunteer for The Pet Adoption Center of Orange County. and engage in the activities related to being a volunteer.

I hereby freely and voluntarily, without duress, execute this Waiver under the following terms:

1. **Waiver and Release.** I, the Volunteer, release and forever discharge and hold harmless PACOC and its successors and assigns 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 volunteer work with PACOC.

I understand and acknowledge that this Waiver discharges PACOC from any liability or claim that I, the Volunteer, may have against PACOC with respect to bodily injury, personal injury, illness, death, or property damage that may result from my participation with PACOC. I also understand that PACOC 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, illness, death or property damage.

2. **Insurance.** I, the Volunteer, understand that I expressly waive any such claim for compensation or liability on the part of PACOC beyond what may be offered freely by the representative of PACOC in the event of such injury or medical expense.
3. **Medical Treatment.** I hereby release and forever discharge PACOC from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during my time with PACOC.
4. **Assumption of the Risk.** I understand that my time with PACOC may include activities that may be hazardous to me, including, but not limited to, animal activities, loading and unloading of heavy equipment and materials, and local transportation to and from work sites. I hereby expressly and specifically assume the risk of injury or harm in these activities and release PACOC from all liability for injury, illness, death, or property damage resulting from the activities of my time with PACOC.
5. **Photographic Release.** I grant and convey unto PACOC all right, title, and interest in any and all photographic images and video or audio recordings made by PACOC during my work for PACOC, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.
6. **Other.** I expressly agree that this Waiver is intended to be as broad and inclusive as permitted by the laws of the State of California in the United States of America, and that this Waiver shall be governed by and interpreted in accordance with the laws of the State of California. I agree that in the event that any clause or provision of this Waiver shall be held to be invalid by any court of competent jurisdiction, that the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

Volunteer's Signature: _____

Date: _____

Print Volunteer's Name: _____

Street Address: _____