

Save A Pet Florida, Inc.
Young Friends of Save A Pet, Volunteer program
PO Box 2444
Palm Beach, FL 33480
561-835-9525
www.saveapet.com

Medical Waiver / Release

Child's name _____

Address _____

City/State/Zip _____

Date of Birth _____ Medical Conditions _____

List Allergies & Medications _____

Physicians Name _____ Physician Phone # _____

EMERGENCY CONTACTS:

#1 Name & phone: _____

#2 Name & phone: _____

I hereby authorize my child to participate in the Save A Pet Florida, Inc.'s Young Friends of Save A Pet volunteer program. In consideration of Save A Pet Florida, Inc. providing volunteer opportunities to my child, I hereby release, acquit, and discharge Save A Pet Florida, Inc. its successors and assigns, its employees, agents, members, volunteers, officers and directors from all claims, demands, actions, causes of action (including negligence and/or strict liability), damages, injuries and cost of any nature or kind whether property, personal injury or bodily injury or any other type of injury or damage that may arise from my child's participation in the volunteer program as well as the use of the facilities of the organization and all other facilities where the organization may hold events. This release is on my behalf as the parent or legal guardian of the above named child and any person claiming through my child. I understand the risks inherent in the program in general, and in any activity involving children and animals. I give authorization to representatives of Save A Pet Florida, Inc. to authorize emergency medical treatment to be given to my child in the event of any accident or injury, if I cannot be reached.

Any person signing this document as parent or on behalf of a parent agrees to indemnify and hold harmless Save A Pet Florida, Inc., its officers, employees, guests, agents, or anyone else associated with the program from any and all claims or lawsuits in which the minor child or it's parents may bring. This indemnification and hold harmless agreement includes, but is not limited to: all damages, settlements, costs, and all attorneys fees incurred in defense of such claims.

NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN

READ THIS FORM COMPLETELY AND CAREFULLY, YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE THAT YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM SAVE A PET FLORIDA, INC. OR ITS REPRESENTATIVES IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM AND SAVE A PET FLORIDA, INC. AND ITS REPRESENTATIVE HAVE THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

I have read and attest that I agree with the above and all the terms on the front side of this document.

Print Name of Parent or Guardian

Signature of Parent or Guardian

____/____/____
Date