

Cardio for Canines/ Mutt's Morning Out Registration Form

First & Last Name:		
Full Address:		
Mobile Phone Number that you have	on you right now:	
Email Address:		
How did you hear about our progran		
Facebook	VHS Website Other (please specify):	
Word of Mouth		
Are you over 18? (must be 18+ to pa	rticipate with a VHS shelter dog): Yes N	No
Do you have children with you? If so	, how many? (Release must be signed for each ch	ild.)
Signature:		

Please present your driver's license or other valid photo ID.

Thank you and have fun!

RELEASE AND WAIVER OF LIABILITY AND CLAIM OF NEGLIGENCE OR ANY OTHER CLAIM OF MISCONDUCT

ADULTS

I certify that as a volunteer for the Vanderburgh Humane Society, Inc., I am aware of the dangers of participating in services provided to unknown, abused or injured animals. Risks include but not limited to those caused by animals, conditions and environment of distressed animals, actions of animals and of animal owners or other volunteers. I hereby take action for myself, my executors, my administrators, heirs, next of kin, successors, and assigns as follows:

I WAIVE, RELEASE AND DISCHARGE from any and all liability from death, disability, personal injury, property damage, property theft or action of any kind which may hereafter accrue to me as a result of my being a volunteer for the Vanderburgh Humane Society. This form shall be construed broadly to provide a release and waiver to a maximum extent permissible under the applicable law. I hereby certify that I am eighteen (18) years of age or older. I have read this document and I understand its contents.

contents.				
SIGNATURE	DA	ATE		
Health Insurance: Yes No	If yes, please state Ins	surance Co.:		
YOUTH	VOLUNTEER RELEAS	SE OF LIABILITY	_	
Release executed on 20		as parent/guardia 	an	
Society Volunteer Program of the Vand Whereas the above named Vanderburgh Humane Society, Inc. is of Indiana, and; Whereas, the above named ch risk that might be involved in being ard assume those risks and hazards. Now, therefore, realizing the a above child by the Vanderburgh Huma the VHS shelter at 400 Millner Drive, I the above named student, for and or release and discharge the Vanderburg and liability insurance carriers, from al	derburgh Humane Socie minor and the parent a not-for-profit corporation and and parent(s) of said and animals, and the profit consideration of the society, Inc., to part Evansville, IN 47710. I, to behalf of myself and the Humane Society, Inc., I action, damages or judgme Society, Inc for all	t(s) of said child are aware that the conformal child are fully aware of the hazards are emise itself, and are willing to accept an accept an accept in the VHS Volunteer Program at the undersigned parent/legal guardian my said minor child hereby fully forever its agents, employees, directors, officed agments which I may have now or in the personal injuries to my child or myse	ne te nd nd ne at of er rs	
PARENT/GUARDIAN SIGNATUR	E	DATE		