



415 1st Avenue East
 P.O. Box 86
 Brooks, Ab. T1R 1B2
 Phone: 403 362-4323

Email: info@bapsociety.com
 Website: www.bapsociety.com

Volunteer Waiver (Release Form)

THE UNDERSIGNED, DO HEREBY CONSENT to being a participant in any and all interaction with any or all animals at the Brooks Animal Protection Society, and DO HEREBY REMISE, RELEASE AND FOREVER DISCHARGE the Brooks Animal Protection Society of Brooks, its employees, board members, agents, the successors, and assigns, of and from any and all claims, demands, rights or causes of action of whatsoever kind or nature arising from, or by any reason of, and all known or unknown, foreseen or unforeseen bodily or personal injuries, damage to property, and the consequences thereof which theretofore have been or which hereafter may be sustained by the Undersigned, or by any other person or persons having a legal interest therein, in consequence or such accident or resulting injuries by such participation in activities of the Brooks Animal Protection Society.

Dated at Brooks, in the Province of Alberta, this ____ day of _____ 20 __

Name (PRINT): _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: _____ Alternate Phone: _____

Signature: _____

Parent (if under 18): _____ Signature: _____

Volunteer Addendum

In addition, if my interaction with any animal causes stress or harm to that animal to the point of needing veterinary care, I will take full responsibility for ALL costs incurred to return that animal to a healthy state.

Dated at Brooks, in the Province of Alberta, this ____ day of _____ 20 __

Name (PRINT): _____ Parent (if under 18): _____

Signature: _____

Witness (Printed Name): _____

Witness Signature: _____

...until they find home