

Liability and Media Release Form for Minors and/or Adults

DUPLIN COUNTY ANIMAL SERVICES has permission to use any and all photographs taken of my child and to include his/her name in materials that promote county services or county programs, or to publicize any event without payment or notification. I understand that all prints and negatives become the sole property of the county and may be used by the county without payment or notification. I understand that my child will be participating in activities that could include newspaper, county or internet coverage.

I also understand that my child will be working with animals independently as well as with staff, volunteers, and the shelter with and without direct adult supervision. Because most of these animals are strays we do not always know their history. Animals, even under the best of circumstances, may be unpredictable, may bite or scratch, and may transmit zoonotic diseases. I hereby release and discharge DCAS and owners of individual animals, from all actions, claims, or demands that we or our heirs, personal representatives, or assigns may have for injuries or property damage resulting from the volunteer program.

Volunteer Waiver & Release Form

I, the legal parent or guardian, agree to release, discharge, indemnify, and hold harmless DCAS its officers, director, and employees for any and all claims, demands, losses, costs, liabilities, settlement agreements, damages, expenses and suits at law or in equity to my personal property or the property of my child that arise out of my child performing services for the DCAS, its officers, director or employees, or participating in DCAS volunteer programs. I recognize that in handling animals while performing services for DCAS, a risk of injury exists, including but not limited to, personal physical harm. On behalf of myself, my heirs, assignees, guardians, and personal and legal representatives and executors, I hereby release, discharge, indemnify and hold harmless DCAS, its officers, directors and employees for any and all claims, demands, losses, costs, liabilities, settlement agreements, damages, and expenses connected with my child's services to DCAS whether caused directly or indirectly by any negligence (active or passive) attributable to DCAS, its officers, directors, or employees.

I understand that public relations are an important part of volunteering at DCAS. I therefore agree on behalf of myself, my heirs, assignees, guardians, and personal and legal representatives and executors to allow DCAS to use any photographs and images taken of my child in the Society's public relations efforts and without payment. DCAS has permission to use any and all photographs or images of my child and to include his/her name in materials that promote DCAS services or DCAS programs, or to publicize any event without payment or notification. I understand that all prints and negatives become the sole property of DCAS and may be used by DCAS without payment or notification. I understand that my child will be participating in activities that could include radio, TV, marketing, or internet coverage. I

acknowledge that I have read and fully understand the terms and conditions of the foregoing Volunteer Waiver and Release and, that as the legal parent or guardian, agree and will comply with the same.

Waiver of State Compensation Benefits

Under our Workers' Compensation policy, DCAS volunteers are not classified as "employees" and are therefore ineligible for Workers' Compensation coverage for injuries that might be sustained while volunteering for DCAS. DCAS strongly recommends that each volunteer maintain his or her own medical insurance. If a volunteer is injured performing a DCAS volunteer job, it must be reported to the authorized employee at DCAS at the time of the incident.

Tetanus Waiver

DCAS feels it is important for all volunteers to be current on their tetanus vaccination if they will be handling animals as a DCAS volunteer. If a volunteer has questions about the tetanus vaccination, he or she is encouraged to consult a physician, at the volunteer's own expense, to decide whether or not to be vaccinated against tetanus. I, as the legal parent or guardian, have read, understand and agree to the above tetanus waiver. Furthermore, I release DCAS from all responsibility that may occur because of my child not being vaccinated against tetanus and I understand that whatever decision I make regarding vaccinations for my child is at my own risk.

Rabies Waiver

DCAS feels it is important for all volunteers to be current on their vaccinations if they will be handling animals as a DCAS volunteer. If a volunteer has questions about rabies or the rabies pre-exposure shots, he or she is encouraged to consult a physician, at the volunteer's own expense, to decide whether or not to be vaccinated against rabies, at volunteer's own expense. It is the volunteer's choice to undergo and completes a rabies pre-exposure vaccination series. I, as the legal parent or guardian, have read, understand and agree to the above rabies waiver. Furthermore, I release DCAS from all responsibility that may occur because of my child not pursuing the pre-rabies exposure vaccination series and I understand that whatever decision I make regarding this vaccination for my child is at my own risk.

VOLUNTEER CONTRACT

THIS VOLUNTEER CONTRACT dated this _____ day of _____, _____

BETWEEN:

**DUPLIN COUNTY ANIMAL SERVICES of 117 MIDDLETON CEMETERY LN,
KENANSVILLE, NC 28349**

- AND -

Shelter Volunteer of: Duplin County Animal Services

BACKGROUND:

- A. The Employer is of the opinion that the Volunteer has the necessary qualifications, experience and abilities to assist and benefit the Employer in its business.
- B. The Organization desires to have the Volunteer and the Volunteer has agreed to accept and enter such requirements upon the terms and conditions set out in this Agreement.

IN CONSIDERATION OF the matters described above and of the mutual benefits and obligations set forth in this Agreement, the receipt and sufficiency of which consideration is hereby acknowledged, the parties to this Agreement agree as follows:

1) **Job Title and Description**

The organization agrees to allow the Volunteer as a shelter volunteer. The Volunteer will be expected to perform the following job duties:

- Early a.m. bowls are pulled and beds hung up, dog runs are sanitized, towel dry the aisle.
- Food and water bowls are sanitized.
- Put the beds down
- Feed dogs and give fresh water
- Cat/kitten room have litter boxes and food/water bowls emptied, sanitized and filled with fresh litter/water/food. Use only half a scoop of litter. This task is easier when there is enough space to set up cat housing in another cage otherwise you can put friendly cats into the puppy cages until their cage is finished.
- Floors sanitized.
- Walls wiped (inside dog kennels also)
- Food and water distributed.
- Medications are administered as necessary if any.
- Dog runs are checked throughout the day and cleaned as necessary
- Laundry is started, clean laundry folded and put up

- Dogs are walked and socialized.
- Stray dogs are kept for 72hrs (according to State regulation), assessed and offered for adoption. If the animal appears to have an owner (collar on and the dog is in good shape) a determination may be made to hold the dog longer.
- Shelter is opened to public after morning cleaning for visiting and adopting pets. Adoption is warranted after evaluation has been determined that a particular animal is a good "fit" for the adopter's family and life style. Families are accompanied by staff on walks with dogs they may like to adopt.
- All in-takes should be scanned for a microchip.
- All animals rescued or adopted should be escorted to their freedom ride to assist the new caretaker in loading the animal(s).

a) The Volunteer agrees to the terms and conditions set out in this Agreement. The Volunteer agrees to be subject to the general supervision of and act pursuant to the orders, advice and direction of the Shelter Employees.

b) The Volunteer will perform any and all duties that are reasonable and that are customarily performed by a person holding a similar position in the industry or business.

c) The Volunteer agrees to abide by the Employer's rules, regulations, and practices, including those concerning work schedules.

2) **Place of Work and Times**

a) The Employee's primary place of work will be at the following location:

Middleton Cemetery Ln, Kenansville, NC 28349

volunteer times Monday thru Friday 8am-12pm and 1pm -4pm

Open to the public from 10am-12pm and 1pm-4pm, Monday-Friday

3) **Volunteer Benefits**

b) The time volunteered at the shelter can be used for resumes and college applications if you follow the sign in and sign out sheet. You are responsible for your recorded time and must use the form to sign in and out in order to use that time for community service, resume and/or applications.

4) **Termination of Volunteer**

a) Where the Volunteer has breached any reasonable term of this Agreement or where there is just cause for termination, the Shelter Employee may terminate the Volunteer without notice, as permitted by law.

5) **General Provisions**

a) Time is of the essence in this Agreement.

d) This Agreement may be executed in counterparts. Facsimile signatures are binding and are considered to be original signatures.

e) This Agreement constitutes the entire agreement between the parties and there are no further items or provisions, either oral or written. The parties to this Agreement stipulate that neither of them has made any representations with respect to the subject matter of this Agreement except such representations as are specifically set forth in this Agreement.

IN WITNESS WHEREOF, the parties have duly affixed their signatures under hand and seal on this ____ day of _____, _____.

SHELTER EMPLOYEE:

DUPLIN COUNTY ANIMAL SERVICES

Per: _____

VOLUNTEER:

shelter volunteer

PARENT/GUARDIAN (RESPONSIBLE PARTY)

SIGNATURE _____

DATE _____

STUDENT/MINOR SIGNATURE _____

DATE _____

WITNESS _____

DATE _____

