



Volunteer Application



Thank you for your interest in volunteering with Enchanted Forest Wildlife Rescue of KY! We are so excited to have you join our team! Please answer honestly!

Name: _____

Date of Birth: _____

Address: _____

Phone Number: _____ Cellphone / Landline

Email: _____

Emergency Contact Name and Phone Number:

Are you a licensed driver? Yes No

Do you have a current tetanus shot? Yes No

Do you have reliable, insured transportation? Yes No

Why do you wish to volunteer with us?

Please list your previous volunteer/animal care experience:

Do you have any special abilities or talents that you would be willing to share with our program? Please list:

I have answered all of the above questions honestly and to the best of my ability.

Signature: _____ Date: _____



Waiver and Release of Liability

IN CONSIDERATION OF the risk of injury that exists while participating in Enchanted Forest Wildlife Rescue experience (hereinafter the "Activity"); and

IN CONSIDERATION OF my desire to participate in said Activity and be given the right to participate in same;

I HEREBY, for myself, my heirs, executors, administrators, assigns, or personal representatives (hereinafter collectively, "Releasor", "I", or "me", which terms shall also include Releasor's parents or guardians if Releasor is under 18 years of age), knowing and voluntarily enter into this WAIVER AND RELEASE OF LIABILITY and hereby waive any and all rights, claims or causes of action of any kind arising out of my participation in the Activity; and

I HEREBY release and forever discharge Enchanted Forest Wildlife Rescue, located at _____, _____, and _____, and their affiliates, managers, members, agents, attorneys, staff, volunteers, interns, heirs, representatives, predecessors, successors, and assigns (collectively, "Releasees"), from any physical or psychological injury that I may suffer as a direct result of my participation in the aforementioned Activity.

I AM VOLUNTARILY PARTICIPATING IN THE AFOREMENTIONED ACTIVITY AND I AM PARTICIPATING IN THE ACTIVITY ENTIRELY AT MY OWN RISK. I AM AWARE OF THE RISKS ASSOCIATED WITH PARTICIPATING IN THIS ACTIVITY, WHICH MAY INCLUDE, BUT NOT LIMITED TO: PHYSICAL OR PSYCHOLOGICAL INJURY, PAIN, SUFFERING, ILLNESS, DISFIGUREMENT, TEMPORARY OR PERMANENT DISABILITY (INCLUDING PARALYSIS), ECONOMIC OR EMOTIONAL LOSS, AND DEATH. I UNDERSTAND THAT THESE INJURIES OR OUTCOMES MAY ARISE FROM MY OWN OR OTHERS' NEGLIGENCE, CONDITIONS RELATED TO TRAVEL TO AND FROM THE ACTIVITY, OR FROM CONDITIONS AT THE ACTIVITY LOCATION(S). NONETHELESS, I ASSUME ALL RELATED RISKS, BOTH KNOWN AND UNKNOWN TO ME, OF MY PARTICIPATION IN THIS ACTIVITY.

I FURTHER AGREE to indemnify, defend and hold harmless the Releasee against any all claims, suites, or actions of any kind whatsoever of liability, damages, compensation, or otherwise brought by me or anyone on my behalf, including attorney fees and any related costs.

I FURTHER ACKNOWLEDGE that the Releasees are not responsible for errors, omissions, acts of failures to act of any party or entity conducting a specific event or activity on behalf of the Releasees. In the event that I should require medical care or treatment, I authorize Enchanted Forest Wildlife Rescue to provide all emergency medical care deemed necessary, including but not limited to, first aid, CPR, the use of AEDs, emergency medical transport, and sharing of medical information with medical personnel. I further agree to assume all costs involved and agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I carry my own health insurance.

I FURTHER ACKNOWLEDGE that this Activity may involve a test of a person's physical and mental limits and may carry with it the potential of death, serious injury, and property loss. I agree not to participate in the Activity unless I am medically able and properly trained, and I agree to abide by the decision of the Enchanted Forest Wildlife Rescue official or agent, regarding my approval to participate in the Activity.

I HEREBY ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS “WAIVER AND RELEASE” AND FULLY UNDERSTAND THAT IT IS A RELEASE OF LIABILITY. I EXPRESSLY AGREE TO RELEASE AND DISCHARGE ENCHANTED FOREST WILDLIFE RESCUE AND ALL OF ITS AFFILIATES, MANAGER, MEMBERS, ATTORNEYS, STAFF, VOLUNTEERS, INTERNS, HEIRS, REPRESENTATIVES, PREDECESSORS, SUCCESSORS, AND ASSIGNS, FROM ANY AND ALL CLAIMS OR CAUSES OF ACTIONS AND I AGREE TO VOLUNTARILY GIVE UP OR WAIVE ANY RIGHT THAT I OTHERWISE HAVE TO BRING A LEGAL ACTION AGAINST ENCHANTED FOREST WILDLIFE RESCUE FOR PERSONAL INJURY OR PROPERTY DAMAGE.

To the extent that statute or case law does not prohibit releases for ordinary negligence, this release is also for such negligence on the part of Enchanted Forest Wildlife Rescue, its agents, and employees.

I agree that this Release shall be governed for all purposes by Enchanted Forest Wildlife Rescue law, without regard to any conflict of law principles. This Release supersedes any and all oral or written promises or agreements.

In the event that any damages to equipment or facilities occurs as a result of my or my family's or my agent's willful actions, neglect, or recklessness, I acknowledge and agree to be held liable for any and all costs associated with any such actions of neglect or recklessness.

THIS WAIVER AND RELEASE OF LIABILITY SHALL REMAIN IN EFFECT FOR THE DURATION OF MY PARTICIPATION IN THE ACTIVITY, DURING THIS INITIAL AND ALL SUBSEQUENT EVENTS OF PARTICIPATION.

Releasor:

Printed name: _____

Signature: _____

Date: _____

If the participant is under 18:

Printed name of parent/guardian: _____

Signature: _____

Date: _____

Releasee:

Official or agent on behalf of Enchanted Forest Wildlife Rescue

Signature: _____

Date: _____