

**County of Oakland  
Oakland County Department of Public Services  
Animal Shelter & Pet Adoption Center  
Waiver and Release of Liability Form**

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

1. In consideration of participating as a volunteer, I hereby waive, release, and hold harmless the County of Oakland, the Oakland County Department of Public Services, and Oakland County Animal Care Center, including their officers, directors, staff, employees, agents, and contractors from any and all liability, causes of actions, claims, demands or suits against Oakland County, the Oakland County Department of Public Services, Oakland County Pet Adoption Center for any injuries, damages to property, or any other harm of any nature whatsoever which may arise while engaged in activity on behalf of Oakland County and/or Oakland County Department of Public Services, Oakland County Pet Adoption Center.

2. I further acknowledge and understand that there may be risks associated with the activity on behalf of Oakland County and/or Oakland County Department of Public Services, Oakland County Pet Adoption Center and therefore assume all risks of injury, property damage, or any other harm of any nature whatsoever, incurred or suffered while engaged in the activity on and/or upon the premises of Oakland County and/or Oakland County Department of Public Services, Oakland County Pet Adoption Center.

3. I understand that I am participating in this program on my own time and at my own choice, and I further acknowledge and understand that I will not be compensated for this voluntary program.

4. I acknowledge that I have read the terms of this Waiver and Release of Liability Form, and understand and agree to the terms.

5. This waiver and release will remain in effect for one year from the date on which it is signed.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_