

**Teller County Regional Animal (TCRAS) DOGGY DAY OUT PROGRAM  
VOLUNTEER AGREEMENT AND RELEASE**

Thank you for your interest in **TCRAS** Doggy Day Out program. Doggy Day Out is a unique program that allows volunteers to take shelter dogs for a day-long outing. By participating in the Doggy Day Out program, I agree to the following:

I understand that volunteering at **TCRAS** may require me to come in contact with animals, and that there are risks associated with my volunteer activities, including but not limited to dog bites and/or scratches. I assume the risks and accept personal liability for any damages that might occur as a result of my volunteer activities. I HEREBY IRREVOCABLY RELEASE **TCRAS**, AND (2) ITS OFFICERS, DIRECTORS, EMPLOYEES, AGENTS, AND VOLUNTEERS (collectively referred to as “Released Parties”) FROM ANY AND ALL CLAIMS I MAY HAVE, OR WHICH MAY HEREAFTER ACCRUE TO ME, AGAINST RELEASED PARTIES FOR PERSONAL INJURY, INCLUDING DEATH, AND ALL PROPERTY DAMAGE OR LOSS, ARISING OUT OF MY VOLUNTEER ACTIVITY WITH **TCRAS**.

I hereby agree to indemnify, defend and hold harmless the Released Parties, from and against all claims and demands whatsoever that may arise out of my volunteer activities.

I agree that if I volunteer to transport any **TCRAS** animal(s) in my personal vehicle for any purpose, I will 1) maintain at least the State-required minimum amounts of automobile insurance on the vehicle, and 2) release, indemnify and hold the Released Parties harmless from any claims arising from and/or related in any way to such animal’s presence in my vehicle.

I acknowledge and understand that I am a volunteer of **TCRAS**. I am not eligible for **TCRAS** Workers’ Compensation or any other type of compensation or employee benefit in connection with my volunteer activities.

By using the **TCRAS** tags or the #doggydayout hashtag in the images and other content I post on my social media accounts related to my volunteer activities, I hereby grant **TCRAS** and Humane Society Silicon Valley d/b/a Mutual Rescue a non-exclusive, fully paid, worldwide, perpetual license to use, modify, publicly perform, publicly display, and reproduce my photographs, name, and likeness solely for marketing and promotional purposes.

I certify that I am 18 years of age or older. I have received and read **TCRAS**’s current version of the Doggy Day Out Manual and agree to abide by its requirements and guidelines. Further, I specifically agree to the following:

1. To care for and treat humanely any dog given to me.
2. I reviewed and understand the website: [www.ispeakdog.org](http://www.ispeakdog.org)
3. To keep the dog on leash unless confined in my home or securely fenced yard.
4. To use reasonable care to ensure the safety and well-being of the dog in my care, the safety of other dogs, and the people the dog comes into contact with.
5. To contact **TCRAS** if the dog exhibits symptoms that indicate a serious condition. Please see **TCRAS**’s Doggy Day Out Manual for examples of potential emergencies.
6. To keep the dog under my direct supervision at all times during the volunteer activity.
7. To immediately notify **TCRAS** in the event of a missing or injured dog, if the dog bites any person or animal, or any other injury or accident that I witness or experience resulting from my volunteer activities.
8. That all dogs are the property of **TCRAS** and shall not be sold, given away, or adopted out without prior approval of **TCRAS**’s authorized personnel.
9. To provide any change of my personal information, such as name, address, or phone number.

I understand that this Doggy Day Out Volunteer Agreement and Release is binding on my heirs, assigns and legal representatives. This Doggy Day Out Volunteer Agreement and Release form is executed by me voluntarily and without reliance upon any representation by any person.

**By signing below, I acknowledge and represent that I have read and understood the foregoing release, sign it voluntarily, and agree to the indemnity and waiver of liability above.**

\_\_\_\_\_  
Volunteer’s Printed Name

\_\_\_\_\_  
Volunteer’s Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Manager, of **TCRAS**

\_\_\_\_\_  
Date