



**PAWS YOUTH Volunteer Permission and Release Form**

1401 Trout Road, State College, PA 16801, phone 814.237.8722

This form is to be completed by the parent or legal guardian (and child) of a child under the age of 18. **PAWS policies prohibit children under 18 from volunteering unless accompanied and supervised by a parent, legal guardian, or an authorized "Responsible Adult" (21 or older).** For this reason, either you or your authorized "Responsible Adults" must also complete the PAWS Volunteer Application and Agreement Form. Children under 18 do NOT need to complete the PAWS Volunteer Application and Agreement Form.

**Please list the children under 18 that may Volunteer with You or Your Authorized Responsible Adult(age 21 and over)**

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

PARENT or LEGAL GUARDIAN NAME \_\_\_\_\_ Relationship \_\_\_\_\_

PHONE \_\_\_\_\_ Email \_\_\_\_\_

**TO BE COMPLETED BY THE YOUTH VOLUNTEER:**

Do you have a dog(s)? \_\_\_\_\_ If yes, what kind of dog(s) do you have? \_\_\_\_\_  
\_\_\_\_\_

Do you have a cat(s)? \_\_\_\_\_ If yes, what kind of cat(s) do you have? \_\_\_\_\_  
\_\_\_\_\_

Do you help take care of your cat(s) or dog(s)? \_\_\_\_\_ If yes, what do you do for your cat(s) or dog(s)? - \_\_\_\_\_  
\_\_\_\_\_

**TO BE COMPLETED BY THE PARENT/GUARDIAN:**

If you will not accompany your children while they volunteer, please list names, addresses, and telephone numbers of any Responsible Adults (21 or older) that you authorize in your stead to accompany and supervise your children while they volunteer:

\_\_\_\_\_  
\_\_\_\_\_

Please describe each child's experience with your dogs and with other dogs:

\_\_\_\_\_  
\_\_\_\_\_

Are the children listed above accustomed to large dogs (over 50 pounds)? \_\_\_\_\_

Please describe each child's experience with your cats and with other cats:

\_\_\_\_\_  
\_\_\_\_\_

Have any of the children listed above had any negative interactions with dogs or cats (been bitten, chased, scratched, etc.)? If yes, who? \_\_\_\_\_ What happened? \_\_\_\_\_  
\_\_\_\_\_

Are any of the children listed above allergic to (circle all that apply): Peanuts Latex Dogs Cats

## Permission and Release of Liability

I have accurately and truthfully completed this Youth Volunteer Permission AND Release Form. In consideration for this opportunity for my child or children ("my children"), I agree to the following terms and conditions, intending to be legally bound by them:

**1) PAWS POLICIES:** I will instruct my children to at all times abide by the mission, rules, regulations, policies, and programs of PAWS while they are volunteers.

**2) SUPERVISION OF CHILDREN WHILE VOLUNTEERING:** When my children volunteer with PAWS, I will ensure that they are accompanied and supervised either by myself or by one of the Responsible Adults listed above. I agree that I will not allow my children to volunteer or attempt to volunteer without this required accompaniment and supervision.

**3) ASSUMPTION OF RISK, LIMITATION OF LIABILITY & INDEMNIFICATION:** I knowingly assume the risks of my children being injured or suffering damages (including but not limited to being bitten, scratched, frightened, or otherwise harmed) in connection with their volunteer work with PAWS. Neither PAWS nor its directors, officers, employees, agents, or volunteers, or its and their heirs, assigns, successors, personal representatives and executors, are liable to me or my children for any injuries, damages, liabilities, losses, judgments, costs or expenses whatsoever, which my children might suffer or sustain in connection with the performance of volunteer activities. I will indemnify, defend and hold harmless PAWS, its directors, officers, employees, agents, and volunteers, and its and their heirs, assigns, successors, personal representatives and executors, from and against any claims, lawsuits, injuries, damages, losses, judgments, costs or expenses whatsoever, sustained by my child, any companion animal, or any person in connection with my children's volunteering with PAWS.

### 4) GENERAL

a) Any modification to this Agreement must be in writing and signed by both parties. This Agreement is binding upon your and our heirs, assigns, successors, personal representatives and executors.

b) The terms and conditions contained in this Youth Volunteer Permission and Release Form are binding upon me, my spouse/partner, and my and his/her respective heirs, assigns, successors, personal representatives and executors.

Dated: \_\_\_\_\_

#### PARENT or LEGAL GUARDIAN

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

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

#### PARENT OR LEGAL GUARDIAN

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

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

#### CENTRE COUNTY PAWS, INC.

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

Name & Title: \_\_\_\_\_

I agree to function as a "Responsible Adult" as defined above and accompany and supervise the children listed on this form in their parent's or legal guardian's stead when those children volunteer:

#### AUTHORIZED RESPONSIBLE ADULT (21 or older)

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

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

#### AUTHORIZED RESPONSIBLE ADULT (21 or older)

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

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