

CANDY D. NELSON AND THE ANIMAL FRIENDS OF WESTMORELAND INC.

VOLUNTEER ASSUMPTION OF RISKS AND RELEASE AGREEMENT

I hereby agree that if I am a volunteer worker for Candy D. Nelson and Animal Friends of Westmoreland Inc. I agree to comply with all the rules and regulations, which may be established from time to time, by Candy D. Nelson and Animal Friends of Westmoreland, Inc. I understand that failure to comply with the rules and regulations of Candy D. Nelson and Animal Friends of Westmoreland, Inc. may result in immediate termination as a volunteer.

I understand that if accepted as a volunteer, all services performed by me will be performed on a strictly voluntary basis, and that I will receive no remuneration, pay, or compensation of any kind, that I will not be an employee of Candy D. Nelson and Animal Friends of Westmoreland, Inc. nor otherwise derive any benefits normally available to employees of Candy D. Nelson and Animal Friends of Westmoreland, Inc., and that Candy D. Nelson and Animal Friends of Westmoreland Inc. shall incur no liability of any nature as a result of my volunteering for Candy D. Nelson and Animal Friends of Westmoreland Inc. I understand and agree that the only benefit I will receive through my capacity as a volunteer is the experience of the participation.

I acknowledge that in performing the labor that is required in my capacity as a volunteer, there exists a risk of injuries and all services performed by me will be done at my own risk. Therefore, on behalf of myself, my heirs, and personal representatives, I hereby release, discharge, indemnify, and hold harmless Candy D. Nelson and Animal Friends of Westmoreland Inc. and her/its assigns, successors, agents, staff, officers, board of directors, employees, contractors, and representatives from any and all claims, causes of action, or demands of any nature of cause whatsoever, including costs and attorney fees, arising out of or relating to my volunteering with Candy D. Nelson and Animal Friends of Westmoreland, Inc., including, but not limited to, accidents, and/or injuries.

VOLUNTEER AND PARENT/GUARDIAN OF A MINOR VOLUNTEER AGREE:

I HAVE CAREFULLY READ, UNDERSTAND, AND VOLUNTARILY SIGN THIS DOCUMENT AND ACKNOWLEDGE THAT IT SHALL BE EFFECTIVE AND BINDING UPON ME, MY MINOR CHILDREN, MY HEIRS, AND OTHER FAMILY MEMBERS, EXECUTORS, REPRESENTATIVES AND ESTATE.

Name of Volunteer	Birth Date (If Under 18)
Signature of Volunteer or Parent/Guardian	 Date