

Group Volunteer Waiver & Release

	ane, and to abide by the policies and procedures as explained to me by Columbus Humane during any voluner training, activity or communication.				
		while I am volunteering for Co		sed for promo-	
		azards volunteering at Columl lless in the event of accident		those willingly	
I certify and w to do so at my		ical condition and able to part	icipate in the above activ	vity, and I agree	
Humane and	that I understand and agree t	participation is as a volunteen at I shall not accrue nor shal ployment by virtue of this agre	I I be entitled to any Colo		
	of Columbus Humane to proder, sexual preference, age, o	vide equal opportunities withor disability.	ut regard to race, color,	religion, nation-	
	Group Name				
	Printed Name				
	Signature		Date		
	Email				
	Street Address	City, State	Zipcode		
	Emergency Contact	Relationship	Phone	-	
□Pleas	se send me information on up	coming events and news from	n Columbus Humane.		

Thank you for your interest in volunteering with us. If you decide you would like to volunteer on a continued basis please visit our website at www.columbushumane.org/volunteer for information on our STEPS program.