

**One Step Closer Animal Rescue (OSCAR)
P.O. Box 248, Sparta, NJ 07871 (973-810-2853)**

VOLUNTEER WAIVER AND LIABILITY RELEASE

Date: _____ Birth Date: _____

First name: _____ Last name: _____

Address: _____

Phone (home, work, fax, cell): _____

E-mail: _____

EMERGENCY CONTACT INFORMATION

In case of emergency, I authorize One Step Closer Animal Rescue (OSCAR) to notify the contacts listed below:

Primary Emergency Contact:

Name / Relationship: _____

Address: _____ Phone Number: _____

Secondary Emergency Contact:

Name / Relationship: _____

Address: _____ Phone Number: _____

RELEASE OF LIABILITY AND WAIVER:

- I understand that because I may handle and/or come in contact with animals, it is important to discuss being vaccinated against tetanus with my physician. I release One Step Closer Animal Rescue, from all responsibility that may occur because of my not pursuing this matter further and I understand whatever decision I make is at my own risk. I have read, understand and agree to the above tetanus information.
- I acknowledge and understand that as a volunteer of One Step Closer Animal Rescue I am not covered by workers' compensation or any other insurance policy through One Step Closer Animal Rescue for any damages or injuries I may sustain during volunteer activities. I understand that I am responsible for obtaining health insurance coverage through an independent health insurance company.
- I fully understand that as a part of my volunteer work for One Step Closer Animal Rescue, I will come into contact with animals either by directly handling them, fostering or through assisting in their care and adoption. Further, I understand that working with animals carries a risk of injury, and that it is possible that I may be bitten, scratched, and/or otherwise injured.
- I fully understand that as a volunteer and/or foster home for One Step Closer Animal Rescue, my family may come in contact with animals at One Step Closer Animal Rescue, events, and I and my family and/or guests may come into contact with animals in my home if I am fostering an animal. I understand that working with animals carries a risk of injury, and it is possible that my family and/or guests may be bitten, scratched and/or otherwise injured.
- My signature to this volunteer liability release attests to my intent to hold harmless and release from all liability One Step Closer Animal Rescue, or any of its past, present or future Officers, agents, volunteers, employees or assigns, from all acts which are related to the normal performance of required and implied duties. My signature, whether original, by fax or any other electronic means, is valid as if it were an original signature.

*Signature: _____ Date: _____

*If under the age of 18 years old, legal guardian must sign.