

VOLUNTEER AGREEMENT AND RELEASE OF LIABILITY

I, _____, residing at _____,
HEREBY ACKNOWLEDGE that I have voluntarily applied to assist the **ONslow COUNTY ANIMAL RESPONSE TEAM ("CART")** in the disaster situation described as follows:

I AM AWARE THAT WORKING THE SAID DISASTER SITUATION MAY BE HAZARDOUS AND I AM VOLUNTARILY PARTICIPATING IN THIS ACTIVITY WITH FULL KNOWLEDGE OF THE NATURE OF THE DANGER INVOLVED AND HEREBY AGREE TO ACCEPT ANY AND ALL RISKS OF INJURY OR DEATH. I FURTHER AGREE TO ADHERE TO THE RULES OF OPERATION ESTABLISHED BY THE ONSLOW COUNTY ANIMAL RESPONSE TEAM.

Please initial: _____

AS LAWFUL CONSIDERATION for being permitted by **CART** to assist in the said disaster and receive, as it may be, disaster relief training and instruction, free meals, transportation, lodging or other like considerations, I hereby agree that I, my heirs, distributees, guardians, legal representatives and/or assigns will not make a claim against, sue, attach the property of or prosecute **CART** for any injury or damage resulting from the negligence or other acts, howsoever caused, by any employee, agent or contractor of **ONslow COUNTY** or its affiliates, as a result of my assisting in the said disaster. In addition, I hereby release and discharge **ONslow COUNTY** and its affiliate organizations from all actions, claims or demands that I, my heirs, distributees, guardians, legal representatives or assigns may have for injury or damage resulting from my assistance in the said disaster.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ONSLOW COUNTY ANIMAL RESPONSE TEAM ("CART") AND THAT I SIGN IT OF MY OWN FREE WILL.

Signature

Witness's Signature

Date

SIGN IN DUPLICATE: ONE COPY TO VOLUNTEER & ONE COPY TO ANIMAL CONTROL