



WOLF RUN WILDLIFE REFUGE

& Educational Facility, Inc.

Name: _____	Date: ___/___/___	18 or older? Y/N	Birthdate: ___/___/___
Address: _____	City: _____	State: _____	Zip: _____
Email: _____	Home Ph# _____	Cell Ph# _____	
Employer: _____	Employer Ph# _____		
Emergency Contact Person: _____	Relationship: _____	Ph# _____	

Why are you interested in being a volunteer for Wolf Run? _____

What specific area do you wish to devote your time?

- fundraising
 landscaping/lawn care
 animal care
 special events
 customer service
 other
 anywhere needed
 none of the above

Do you have any previous experience in any of these areas? (please describe) _____

How much of your time are you willing to donate and when are you available to volunteer? **(We are currently only working with volunteers on Saturdays from 12p-5p)** _____

Have you had any other volunteer experience? Yes/No (If yes, describe): _____

Are you able to work independently? Yes No Do you require any supervision? Yes No

Do you have any physical or mental limitations?

Do you take any medications? Yes No If yes, please list: _____

Have you ever been diagnosed or certified by a physician as mentally infirm or disabled? Yes No
If yes, describe: _____

Have you worked with animals before? Yes / No (If yes, describe): _____

Do you have any expectations of handling the animals? Yes / No (If yes, describe): _____

Are there any animals you are afraid of? _____

How did you learn about Wolf Run Wildlife Refuge? _____

VOLUNTEER WAIVER AGREEMENT

Please read this document (the “Waiver Agreement”) carefully before signing. This waiver agreement will affect your legal rights and will limit or eliminate your ability to bring a future lawsuit.

I understand and acknowledge that I am legally agreeing to the statements in the following paragraphs of this Waiver Agreement by affixing my signature below and that these statements are being accepted by Wolf Run Wildlife Refuge (hereinafter WRWR) in consideration for permitting me to participate in the activities at WRWR, and I further understand that my signature upon this Waiver Agreement is being relied upon by the sponsors, organizers, administrators, volunteers, and other parties defined as the “Released Parties.”

1. I acknowledge that WRWR is a wildlife facility dedicated to the care, treatment, well-being, and general healthcare of both domestic and wild animals and is an extreme test of a person’s physical and mental limits and carries with it the potential for death, serious injury, and property damage. I acknowledge and agree that it is my sole responsibility to determine whether I am sufficiently fit and healthy enough to volunteer or assist in any capacity at WRWR, and that I have conferred with a medical doctor, if need be, who has agreed to my participation at WRWR;
2. On behalf of myself, my executors, administrators, heirs, next of kin, successors and assigns, and anyone else who attempts to sue on my behalf, I HEREBY WAIVE, RELEASE, and FOREVER DISCHARGE Wolf Run Wildlife Refuge, all sponsors, producers, staff, administrators, officials, contractors, vendors, veterinarians and veterinary staff, volunteers, and organizers, and all other persons or entities involved with WRWR, the Commonwealth of Kentucky, the City of Nicholasville, Jessamine County, and other governmental bodies and locales wherein WRWR is located, and the officers, directors, employees, agents, insurers, and representatives of all of the above (collectively, the “Released Parties”), from any and all claims, causes of action, damages, losses (economic and non-economic) and liabilities of every kind (collectively “claims”) for death, personal injury, or property damage which may arise out of, result from, or relate to my participation in, or my traveling to or from, any WRWR activity, including but not limited to any claims for theft, damage to any equipment, negligence, partial or permanent disability, claims relating to the provision of first aid, medical care, medical treatment, or medical decisions (by WRWR staff and/or volunteers), and any claims for medical or hospital expenses.

3. I acknowledge and ASSUME ALL OF THE RISKS of feeding, bathing, cleaning, treating, and maintenance of animals, and mowing, weed-eating, general farm care, general labor, general construction, and all other WRWR volunteer tasks, and in any other WRWR event I choose to participate (collectively "risks"). I acknowledge that these risks may include dangerous conditions and exposure to potential physical injury or even death resulting from, among other things, general animal care, falls, contact or encounters with other participants, staff, officials, contractors, vendors, volunteers, spectators, and animals, the effects of weather including heat, cold, and humidity, defective equipment, dangerous conditions on the grounds, and other manmade and natural hazards. By signing below, I understand that I will be participating in all aspects of WRWR at my own risk, that ultimately my responsibility to risk participation at WRWR is simply that, my responsibility. I am waiving and releasing my legal rights to sue for any injury or damages arising out of or resulting from all such risks. I further understand that these risks may be the result of negligence or carelessness on the part of persons or entities defined above as Released Parties.

4. I FURTHER COVENANT and AGREE NOT TO SUE any of the Released Parties for any of the claims that I have waived, released, or discharged herein. I AGREE TO INDEMNIFY and HOLD HARMLESS the Released Parties from any and all expenses incurred, claims made, or liabilities assessed against them, including but not limited to attorneys' fees and litigation expenses, arising out of or resulting from, directly or indirectly, in whole or in part, my breach or failure to abide to any part of the Waiver Agreement, my breach or failure to abide by any of WRWR's rules, and my actions or inactions which cause injury or damage to any other person.

5. I AGREE to abide by WRWR's rules as they may be amended from time to time. I FURTHER GRANT WRWR the right, permission, and authority to use my name, picture, or photograph in any broadcast, telecast, commercial advertisement, promotion, or other WRWR need, and I WAIVE any rights to future compensation to which I might otherwise have been entitled for such use.

6. If any court or legal entity deems any provision or portion of this volunteer application null and void, such ruling shall not render an ineffective on any other portion or provision of this agreement.

7. Any person signing below on behalf of a minor under the age of 18 hereby acknowledges that he or she has the legal capacity and authority to act of behalf of the minor and to legally bind the minor to this Waiver Agreement, and that he or she agrees to indemnify and hold harmless the Released parties for any expenses incurred, claims made, or liabilities assessed them as a result of any insufficiency of legal capacity or authority to act on behalf of the minor in the execution of the Waiver Agreement.

 Volunteer Signature

____/____/____
 Date

 If under age 18, a parent or guardian must sign here