

This Release and Waiver of Liability (the "release") executed on

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24 Hour Emergency & Specialty Care

Volunteer Release and Waiver of Liability Form

releases, Mount Laurel Veterinary Services, LLC., Mount Laurel Veterinary Farm, LLC., Mount Laurel Veterinary
Real Estate, LLC., and any of their owned, affiliated and/or successor entities ("hereinafter, the "Companies")
and each of its directors, officers, employees, and agents. The Volunteer desires to provide volunteer services
for the Companies and engage in activities related to serving as a volunteer.
Volunteer understands that the scope of Volunteer's relationship with the Companies is limited to a volunteer
position and that no compensation is expected in return for services provided by Volunteer; that The
Companies will not provide any benefits traditionally associated with employment to Volunteer; and that
Volunteer is responsible for his/her own insurance coverage in the event of personal injury or illness as a result
of Volunteer's services to the Companies.
1. Waiver and Release: I, the Volunteer, release and forever discharge and hold harmless the Companies
and its successors and assigns from any and all liability claims, and demands of whatever kind of

- 1. Waiver and Release: I, the Volunteer, release and forever discharge and hold harmless the Companies and its successors and assigns from any and all liability, claims, and demands of whatever kind of nature, either in law or in equity, which arise or may hereafter arise from the services I provide to the Companies. I understand and acknowledge that this Release discharges the Companies from any liability or claim that I may have against the Companies with respect to bodily injury, personal injury, illness, death, or property damage that may result from the services I provide to the Companies or occurring while I am providing volunteer services.
- 2. Insurance: Further I understand that the Companies do not assume any responsibility for or obligation to provide me with financial or other assistance, including but not limited to medical, health, or disability benefits or insurance. I expressly waive any such claim for compensation or liability on the part of the Companies beyond what may be offered freely by the Companies in the event of injury or medical expenses incurred by me.
- **3. Medical Treatment:** I hereby Release and forever discharge the Companies from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during my tenure as a volunteer with the Companies.
- **4. Assumption of Risk:** I understand that the services I provide to the Companies may include activities that may be hazardous to me including, but not limited to work at or upon the property and/or farm, contact with domestic, farm and/or wild animals and other activities and that same may or will involve inherently dangerous activities. As a volunteer, I hereby expressly assume risk of injury or harm from these activities and Release the Companies from all liability.
- 5. Photographic Release: I grant and convey to the Companies all right, title, and interests in any and all photographs, images, video, or audio recordings of me or my likeness or voice made by the Companies in connection with my providing volunteer services to the Companies. I agree and irrevocably license the use of same in any marketing for the Companies including Facebook, Instagram, Twitter or otherwise.
- **6. Other:** As a volunteer, I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of New Jersey and that this Release shall be governed by and interpreted in accordance with the laws of the State of New Jersey. I agree that in the event that any clause or provision of this Release is deemed invalid, the enforceability of the remaining provisions of this Release shall not be affected.

this Release shall not be affected. By signing below, I express my understanding and intent to enter into this Release and Waiver of Liability willingly and voluntarily.	
Signature (Or Parent of Guardian if under the age of 18)	Date