

Waiver And Release of Liability

Print Name			
Address			
City	State	Zip	
Date of Birth	Age		
Zoo Volunteer Zoo Intern		Zoo Docent	
Date Beginning		Date Ending	
I have agreed to participate as a Volumemporia. I understand that there are Volunteer, including, but not limited to f Emporia does not and cannot guara Volunteer at the David Traylor Zoo of the Counter of the Counte	inherent in to risk of in antee the h	risks associated wi njury, illness, or do lealth and safety o	th my participation as a eath. I understand that the City
Knowing the dangers, hazards, and reto participate as a Volunteer, on behalf administrators, I, the undersigned, again my participation in this activity. I her of Emporia, Kansas, its governing booliability for any harm, injury, damage of any nature that I may have or that participation as a Volunteer at the Data	If of myself ree to assure by release ard, office , claims, de t may here	f, my family, heirs, me any and all risk e, forever discharg rs, agents, employ emands, actions, ca eafter accrue to m	and personal representative(s) or as and responsibilities surrounding e, and covenant not to sue the City rees, from and against any and all auses of action, costs, and expenses he, arising out of or related to my
In consideration for being permitted Vaction against the City of Emporia, its act, occurrence, accident or considera I am voluntarily subjecting myself performance of duties as a Volunteer.	officers and officers and officers and officers and officers are not seen to the end of	nd employees and iding negligence d events foreseen a	their insurers and sureties for any uring the periods of volunteering nd unforeseen occurring in the
Signed:			
Date:			
Witness:			
Date:			