

YOUTH LIABILITY AGREEMENT

CHILD'S NAME: _____ AGE: ____

PARENT/GAURDIAN'S NAME:		
ADDRESS:	CITY:	ZIP:
PHONE:	CELL:	
EMERGENCY CONTACT:		PHONE:
ALLERGIES AND/OR SPECIAL NEED)S:	
WAIVER AND RELEASE OF LIABILITY	Y	
As the parent/guardian of		
I understand that my child will be participating may have direct and/or indirect contact with is sometimes unpredictable and that animals though the staff and volunteers will be taking	n the animals. I also un s are capable of inflict	derstand that the behavior of the pets ing serious personal injury, even
I agree to assume those risks and release, in any of its representatives for any injury result		
My Child is to remain on Cache Humane Soc group during off-site events for the duration event, without staff consent, I understand th I release, indemnify, and hold harmless Cach property damages involving my child off Cac	n of the day's activities hat they are outside of the Humane Society fo	. If my child leaves the property or Cache Humane Society's program and r any and all personal injury and
I authorize Cache Humane Society to seek e medical or other condition that would preve Humane Society. I also give permission for a Humane Society.	ent said child from par	ticipation in the activities at Cache
SIGNATURE:		DATE: