

Emergency Contact Information

In case of emergency, please contact:

Name	Phone number	Relationship
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Name	Phone number	Relationship
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SIGNATURE REQUIRED FOR PARTICIPATION IN CASE OF MEDICAL EMERGENCY:

I understand that every effort will be made to contact the persons listed above. In the event he/she cannot be reached, I hereby give permission to the physician selected by The Buster Foundation to hospitalize or to secure proper treatment, order injection, anesthesia, or surgery for myself.

PARTICIPANT'S SIGNATURE: _____

DATE: _____

Name of your Physician: _____

Phone: (_____) _____

Current Medications, if any:

List any medications that should NOT be administered:

List any serious allergies (insects, food, etc.):

Your Insurance Company Name : _____

Holder's Name: _____

Policy #: _____

**VOLUNTEER HOLD HARMLESS AGREEMENT
THE BUSTER FOUNDATION PIT BULL EDUCATION AND RESCUE**



The Buster Foundation, their officers, board members and other volunteers, as well as any co-sponsors of activities I choose to volunteer at are not responsible for any injury which may be suffered by the below named participant while traveling to, during, or returning from volunteering for/with The Buster Foundation Pit Bull Education and Rescue.

I hereby release and agree to hold harmless the promoters, the owners, and the lessees of the premises, the participants, and the officer, directors, officials, representatives, agents, employees and organizational volunteers of all of them, of and from liability, loss, claim and demands that may occur from loss, damage or injury (including death) to my person or property, in any way resulting from, or arising in connection with this, and whether arising while engaged in caring for animals or preparation therefore, or while upon entering or departing from said premises, from any cause whatsoever except liability loss, claim and demands that occur as a direct result of the negligent acts of The Buster Foundation or it's agents. I know the risk and danger to myself and property while upon said premises, so voluntarily and in reliance upon my own judgment and ability, I thereby assume all risk of loss, damage, or injury (including death) to myself and my property from any cause whatsoever, except where such loss, damage or injury (including death) is the direct result of negligent acts of The Buster Foundation or it's agents.

I have read and understand this notice and agree to hold The Buster Foundation Pit Bull Education and Rescue and it's officers harmless should any such circumstances arise as mentioned above.

This agreement remains in effect until revoked or upon written termination of my status as a volunteer with The Buster Foundation Pit Bull Education and Rescue.

VOLUNTEER - PLEASE PRINT

Name: _____ Age: _____

Address: _____

City: _____ Phone: _____

I have read the volunteer's hold harmless agreement and policy guideline instructions given to me by a Buster Foundation officer/senior volunteer and agree to follow them. I am aware that the sponsoring agency has no medical insurance for individuals and any costs associated with an injury stemming from or aggravated by this activity will be the participants' responsibility.

Signature: _____ Date: _____

**THE BUSTER FOUNDATION PIT BULL EDUCATION AND RESCUE
IMAGE RELEASE FORM**

Last Name of Volunteer/Participant	First Name	Initial
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Home Street Address	City	State	Zip
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Phone/E-mail

Last/First Name of Volunteer/Participant's Parent or Legal Guardian if Volunteer/Participant is a Minor

Either the above-named participant ("you") may appear in photographs taken of you by The Buster Foundation Pit Bull Education and Rescue ("Buster Foundation"), its agents or other third parties, or you are voluntarily submitting photographs or artwork of you or your property (the "Image(s)"). In the event that the Images voluntarily submitted by you are of someone or something other than you or your property, you declare you have obtained permission and/or have the ability and authority to submit such Images to The Buster Foundation for the uses outlined below. Unless you inform The Buster Foundation otherwise (in writing), this Release shall cover any and all such Images submitted by you as of the date that you sign this Release.

No payment will be made to you for the use of the Images taken of or submitted by you. You further understand that The Buster Foundation may not be able to return the original Images that you have submitted.

For purposes that support The Buster Foundation's mission, you give The Buster Foundation the right to use, publish, reproduce, modify, adapt and distribute your Images at any time in any manner or medium, including without limitation use in print materials, presentations, the Internet, television, mailed promotions, exhibits, and press releases. If The Buster Foundation uses any Image taken of or submitted by you, The Buster Foundation shall not publish your name or address in connection with the Images without your consent. However, The Buster Foundation may publish the Images with quotations provided or submitted by you.

You agree that The Buster Foundation does not need your consent or approval of the finished product or products, and the copy or other matter that may be used in connection with the Images, or the use to which the Images might be applied. You further agree to release and discharge The Buster Foundation, its agents or third parties, and all persons acting under The Buster Foundation's permission or authority, from any liability by virtue of any blurring, cropping, distortion, alteration, optical illusion, or use in composite form, whether intentional or otherwise, that may occur or be produced in the taking of the Images or in any subsequent processing of the Images, as well as any publication of the Images, including without any limitation any claims for libel or invasion of privacy.

You certify that you have read this document and understand it. Your submission to the terms of this Agreement is your free and voluntary act and deed, and you acknowledge that this release shall be binding upon you and your heirs, legal representatives, and assigns.

You have the right and ability to enter into this Agreement, and to grant the rights and furnish all Images submitted by you pursuant to this Agreement. You are eighteen years of age or older, and, if acting on behalf of a minor, have every right to contract for the minor in the above regard.

Date	Signature of Volunteer/Participant or Parent or Legal Guardian (if Volunteer/Participant is a minor)*
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*The parent with legal custody of minor must sign if parents are divorced or separated.