**Acknowledgement and Signatures:**

Students participating in the Jr. Zoo Crew program are expected to work under the same guidelines as Zoo Employees.

If selected, Jr. Z*o*o Crew are required to report to work on their scheduled days. A typical Jr. Zoo Cr*ew* Volunteer work day is from 10:00 a.m.- 1:30 p.m. or 1:00 p.m. to 4:30p.m., but the schedule may vary based on the needs of the specific assignment, daily programming and staffing. In case of absence, it is the responsibility of the Jr. Zoo Crew to contact the Volunteer Programs Manager prior to the absence.

I understand that if I am selected, I must attend Jr. Zoo Crew Orientation and required training. I understand I must follow all policies and procedures of the Jr. Zoo Crew program, including uniform guidelines. I have considered my summer activities and agree that I will not miss more than three scheduled volunteer days.

I verify that all information in my application is correct, and I agree to the program guidelines.

Signature of Applicant:

Date:

Signature of Parent*/*Guardian:

Date:

**INDIAN CREEK ZO*O V*OLUNTEER WAIVER**

***274*4 Consear Road . Lambertville, MI 48144 73*4*-224-0390 indiancreekzoo*@*aol.com • www.indiancreekzoo.com**

...

I, the below listed Volunteer, desire to work as a volunteer for Indian Creek Zoo and engage in the activities related to being a volunteer for Indian Creek Zoo. I hereby voluntarily, execute this Volunteer *W*aiver under the following terms:

I, the Volunteer, release and hold harmless Indian Creek Zoo and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from my volunteer work with Indian Creek Zoo.

I, the Volunteer understand that this Waiver discharges Indian Creek Zoo, its Owners and Officers, from any liability or claim that I, the Volunteer, may have against Indian Creek *Z*oo with respect to bodily injury, personal injury, illness, death, or property damage that may result from my participation on the Indian Creek Zoo's site. I also fully understand that Indian Creek Zoo does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health or disability insurance, in the event of injury, illness, death or property damage.

I understand that I expressly waive any such claim for compensation or liability on the part of Indian Creek Zoo.

I hereby release Indian Creek Zoo from any claim whatsoever which arises or may arise in the future on account of any first aid treatment or other medical services that are conducted in connection with an emergency during my time with Indian Creek Zoo.

I understand that my time at Indian Creek Zoo may include various activities that may be hazardous to me and I hereby expressly and specifically assume the risk of injury or harm in these activities and release Indian Creek Zoo from all liability for injury, illness, death, or property damage resulting from the activities of my time at Indian Creek Zoo.

I grant unto Indian Creek Zoo all right, title, and interest in any and all photographic images and video or audio recordings that are made by Indian Creek Zoo on its behalf during my work at Indian Creek Zoo, including, but not limited to, any royalties, proceeds, or other benefits that are derived from such photographs or recordings.

| expressly agree that this Waiver is intended to be as broad and inclusive as permitted by the laws of the State of Michigan in the United States of America, and that this Waiver shall be governed by and interpreted in accordance with the laws of the State of Michigan. I agree that in the event that any clause or provision of this Waiver shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to enforceable.

**I UNDERSTAND THAT ANIMALS MAY BITE OR KICK.**

Volunteer's Signature

Print Volunteer's Name

**Date**

Parent's Signature if under 18 years of age

Print Parent's Name

**Date**