

**PARENTAL CONSENT AND
RELEASE OF LIABILITY FOR
CITY OF COOKEVILLE; PUTNAM COUNTY;
COOKEVILLE PUTNAM COUNTY ANIMAL SHELTER;
FRIENDS OF COOKEVILLE PUTNAM COUNTY ANIMALS, INC.;
THE PET CARE CENTER; AND THE DOG PARK**

In consideration of our child, _____ (name), being allowed to participate in the Volunteer Program operated by Cookeville Putnam County Animal Shelter; Friends of Cookeville Putnam County Animals, Inc.; the Pet Care Center; and Dog Park, we, _____ and _____ (names), acknowledge that working at Cookeville Putnam County Animal Shelter; Friends of Cookeville Putnam County Animals, Inc.; the Pet Care Center; and Dog Park can be a hazardous activity. Nevertheless, we grant permission for our child to participate in this activity and assume all the risks associated with this work. We waive all claims for damages against the City of Cookeville; Putnam County; Cookeville Putnam County Animal Shelter; Friends of Cookeville Putnam County Animals, Inc.; The Pet Care Center; and the Dog Park; its officers; and employees for injury to our child's person or property, including death and destruction, and resulting injuries and damages to us, that may arise from this activity. We release the City of Cookeville; Putnam County; Cookeville Putnam County Animal Shelter; Friends of Cookeville Putnam County Animals, Inc.; The Pet Care Center; and the Dog Park; its officers; and employees and agree to hold them harmless from any such liability.

This agreement shall remain in full force until we revoke it in writing.

Print name of Participant

Signature of Participant

Print name of Parent or Guardian

Signature of Parent or Guardian

Print name of Parent or Guardian

Signature of Parent or Guardian

STATE OF TENNESSEE
COUNTY OF PUTNAM

Sworn to and subscribed before me this _____ day of _____, 20__.

NOTARY PUBLIC

My Commission Expires:
