

Community Outreach & Education Center Waiver



Participation Type

- Dog Park User
- Private Rental Guest
- Event Attendee
- Other: _____
- Vendor / Instructor

I, _____ (print name), **voluntarily enter and/or participate** in activities at the Cedar Bend Humane Society Community Outreach & Education Center (“CBHS”), including events or programs involving animals.

I acknowledge that being on the premises and interacting with animals involves inherent risks, including injury, illness, property hazards, and unpredictable animal or human behavior. I understand that CBHS makes no guarantees regarding any animal’s health, behavior, or temperament, and I **voluntarily assume all known and unknown risks** associated with my presence or participation.

To the fullest extent permitted by law, I **release and agree to hold harmless** CBHS, its staff, volunteers, and representatives from any claims, damages, losses, or injuries arising from my presence or participation, including those resulting from negligence.

I agree to **assume responsibility** for any claims, damages, or expenses, including attorney’s fees, arising from my actions or those of any animal or minor under my care while on the premises. This agreement shall be governed by the laws of the State of Iowa, and if any provision is deemed unenforceable, the remaining provisions shall remain in effect.

I acknowledge that I have **reviewed and had access to all applicable CBHS policies**, guidelines, and posted signage, agree to comply with them, and understand that failure to do so may result in removal or denial of participation.

I **grant CBHS permission to photograph or record** me and/or any minor for whom I am legally responsible and to use such images for promotional, educational, or marketing purposes without compensation.

I acknowledge that I have **read, understand, and voluntarily agree** to this waiver and release.

If signing on behalf of a minor, I certify that I am the **parent or legal guardian**, consent to the minor’s participation, assume all risks and responsibility for supervision, and release CBHS from any claims arising from the minor’s presence or participation.

Date

Signature

Date

Parent / Guardian Signature (if under 18)