



COMPASSION UNLIMITED PLUS ACTION

Name: _____ Gender: M/F

Contact No: _____

I HEREBY DECLARE AND CONFIRM AS FOLLOWS;

1. I am visiting the CUPA centre as a volunteer out of my own free will.
2. I will adhere to the centre rules and instructions of the manager while I am visiting.
3. I understand that animals are unpredictable at times and I accept the risks, which include but are not not limited to bites, abrasions, fractures, bruises, injuries and illness or other similar risks caused due to exposure to animals.
4. I understand and agree that CUPA is not responsible for any medical expense or any other loss, damage or expense that I may incur during my time spent volunteering at CUPA or from exposure to shelter animals. I further acknowledge and agree that CUPA will not be liable for any claim/damages in this regard.
5. I agree to CUPA's policy of not uploading any pictures that I may take on any social media sites, and if uploading is absolutely necessary, will seek prior permission from respective centre managers and trustees.
6. I will not interact with or attempt to feed the animals unless under supervision by a CUPA employee.

Emergency Contact: _____

Emergency Contact No: _____ Relation: _____

Signature: _____ Date: _____