

ONE FORM FOR EACH VOLUNTEER  
Complete one form (front and back) for each student.  
Complete one form (front and back) for each adult volunteer.

**RELEASE ACKNOWLEDGEMENT**



SAINT FRANCIS  
SERVICE DOGS

**STUDENT NAME** \_\_\_\_\_ **GRADE** \_\_\_\_\_

**PARENT/ADULT VOLUNTEER NAME** \_\_\_\_\_

This RELEASE ACKNOWLEDGEMENT (this "Acknowledgement"), is dated as of \_\_\_\_\_, 20\_\_ by \_\_\_\_\_ ("Releasor") and Saint Francis Service Dogs, a Virginia non-profit corporation, ("Saint Francis") provides as follows:

**WITNESSETH:**

1. The Releasor hereby waives for the Releasor, his or her heirs, executors, assigns, parents, guardians and representatives any and all claims, causes of action, law suits or demands of any nature whatsoever, known or unknown, including without limitation personal injury, property damages, or other claims, loss, or damages, that could possibly be asserted against Saint Francis, or their employees, trainers, agents, officers, directors, shareholders, parent companies, affiliates, subsidiaries, advertising or promotional agencies, and their successors and assigns.
2. The Releasor hereby indemnifies and holds harmless Saint Francis from and against all claims, damages, losses and expenses, including but not limited to reasonable attorney's fees arising out of or resulting from any action or inaction taken by Saint Francis.
3. The Releasor agrees that this Acknowledgement will be governed by the laws of the Commonwealth of Virginia.

IN WITNESS WHEREOF, the party hereto has hereunto set their hand and seal as of the day and year first above written.

**FOR STUDENTS**

*Signature of parent/guardian is required below:*

Signature of Parent/guardian \_\_\_\_\_ Date \_\_\_\_\_

**Print Parent Guardian Name** \_\_\_\_\_

Minor's Name \_\_\_\_\_

Relationship to minor \_\_\_\_\_

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**FOR PARENT OR ADULT VOLUNTEER**

RELEASOR: (VOLUNTEER)

\_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_

**COMPLETE THE REVERSE SIDE**

**Assumption of the Risk and Waiver of Liability Relating to  
Coronavirus/COVID-19**

**STUDENT NAME** \_\_\_\_\_ **GRADE** \_\_\_\_\_

**PARENT/ADULT VOLUNTEER NAME** \_\_\_\_\_

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

Saint Francis Service Dogs (“Saint Francis”) has put in place preventative measures to reduce the spread of COVID-19; however, Saint Francis **cannot guarantee** that you will not become infected with COVID-19. Further, your in-person interactions with Saint Francis **could increase** your risk of contracting COVID-19.

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By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 through in-person interactions with Saint Francis and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at Saint Francis may result from the actions, omissions, or negligence of me and others, including, but not limited to, Saint Francis employees, volunteers, independent contractors, candidates, partners and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I may experience or incur in connection with my in-person interactions with Saint Francis (“Claims”). I hereby release, covenant not to sue, discharge, and hold harmless Saint Francis, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of Saint Francis, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any Saint Francis activity.

FOR STUDENTS:

Signature of Parent/Guardian: \_\_\_\_\_ Date \_\_\_\_\_

Print Name: \_\_\_\_\_

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FOR ADULT or PARENT VOLUNTEER

Signature of Adult Volunteer: \_\_\_\_\_ Date \_\_\_\_\_

Print Name of Participant \_\_\_\_\_