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STATE OF SOUTH CAROLINA)

**RELEASE OF LIABILITY**

COUNTY OF HORRY )

This release is executed on the \_\_\_\_\_ day of \_\_\_\_\_, 2006,  
by \_\_\_\_\_ of \_\_\_\_\_,  
(name) (address)

hereinafter referred to as Releasor, to The County of Horry, The City of Conway, The Horry Georgetown Animal Coalition, and The Horry County Humane Society (HCHS) of Horry County, South Carolina, herein referred to as Releasee.

In consideration of being permitted to volunteer and work with the sheltered animals, I, the releasor, hereby release and discharge The Releasee and each of them, from all liability to the Releasor, his/her/their legal representatives, heirs, and assigns for any and all loss or damage, any claim or damages resulting from thereof on account of injury, accident, or illness to the Releasor, even injury resulting in the death of the Releasor, whether caused by negligence of the Releasee or otherwise while the Releasor is volunteering.

Releasor agrees to indemnify and hold harmless the Releasee and each of them from any loss, liability, damage or cost they may incur due to volunteering in or upon the property of the Releasee whether caused by negligence of the Releasee or otherwise.

Releasor expressly agrees that this release, waiver, and indemnity is intended to be as broad and inclusive as permitted by the Laws of the State of South Carolina, and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I further release all officials and professional personnel from any claim whatsoever on account of first aid or any service rendered the Releasor during the time volunteering.

This release contains the entire agreement between the parties hereto and the terms of this release are contractual and not a mere recital.

Releasor with the intention of binding himself or herself, his/her heirs, legal representatives, and assigns, expressly releases and discharges Releasee from all claims, demands, and causes of action that the Releasor may have arising from any accident, injuries, or illnesses, and by reason of any and all known and unknown, foreseen and unforeseen bodily injuries and consequences thereof that may be sustained by the Releasor as a consequence of any injury or illness associated with volunteering.

Releasor further states that he/she has carefully read the foregoing release and knows the contents thereof and signs this release as his/her free act.

IN WITNESS WHEREOF, Releasor has executed this release the day and year first above written.

DATE: \_\_\_\_\_

RELEASOR: \_\_\_\_\_

DATE: \_\_\_\_\_

SFHS REP/EMP: \_\_\_\_\_

