



CHENOA MANOR

ANIMAL SANCTUARY & LEARNING CENTER

Participation, Release and Consent

Permission to Participate and Release

I, the undersigned, agree to hold Chenoa Manor, and its volunteers and employees, harmless against any liability, loss, or expense I incur or suffer as a result of my participation Chenoa Manor's programs (the "Programs"), including, but not limited to, any loss, injury, or expense related to traveling to and from Chenoa Manor. I further agree to hold Chenoa Manor harmless from any action or actions, suit or suits, in law or equity, which may be brought by any third party in connection with, or with reference to the administration, planning, preparation, development, conduct, and activities of Chenoa Manor.

Photography and Video Taping and Intellectual Property

I, the undersigned, hereby give permission and grant Chenoa Manor the royalty-free right to archive, publish, reproduce and/or distribute and otherwise use any photographs and video footage (collectively, the "Images") containing my voice and/or likeness and in conjunction with such use, identify me by my full name. I agree that the Images (whether photographs or visual and/or oral recordings), and any and all copyrights of the same, shall be the sole property of Chenoa Manor or its designee. I further agree that Chenoa Manor or its designee has the right to secure any copyright registrations in and to the Images.

I understand that Chenoa Manor shall have the right to use the Images, in whole or in part, altered or unaltered, individually or together, and/or in conjunction with any printed matter and online or electronic content (such as blogs, etc.), in any and all media, and for any purpose related to its exempt purpose whatsoever. I agree that I am not entitled to any payment or any other consideration in connection with Chenoa Manor's use of the Images. I hereby waive any right I may have to inspect or approve of the Images or Chenoa Manor's use of the Images.

Acknowledgement of Inherent Risk and Release

I acknowledge and understand there are inherent risks in the activities conducted in the Programs. I will assume the risk associated therewith, whether known or unknown to me at this time. I recognize that my participation in the Programs is a privilege and, as consideration for this privilege, I release Chenoa Manor, including its employees, agents, members, directors and trustees from
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responsibility and liability for any physical injury, including death or illness, or loss of personal property during my participation in the Programs. This release does not apply to any injury caused by a negligent act on the part of Chenoa Manor's employees or volunteers.

Authorization for Treatment

The medical information I have provided on the Contact Information form is correct to the best of my knowledge. I authorize Chenoa Manor to call 911 or seek other emergency services on my behalf, but understand that Chenoa Manor will not administer treatment.

I understand that neither Chenoa Manor nor its insurance carrier is liable for any medical or hospital costs incurred by myself and, therefore, I agree to remain fully liable and responsible for the payment of any such costs.

This consent and release is binding on my successors and assigns, and it is continuous and may not be revoked.

I HAVE READ AND FULLY UNDERSTAND THE ABOVE INFORMATION, AND AGREE TO THE TERMS SET FORTH HEREIN.

Name (please print)

Signature

Date