



SAINT FRANCIS WOLF SANCTUARY
P.O. BOX 877, MONTGOMERY, TEXAS 77356

INDIVIDUAL RELEASE AND WAIVER

The following must be read, filled out entirely and signed by each individual before access inside the perimeter fencing will be allowed or contact with or near any of the wolves/wolf hybrids at Saint Francis Wolf Sanctuary (SFWS) is permitted.

There is a \$5.00 minimum donation suggested for each person wishing to enter the perimeter and receive a guided tour of the facility. Of course, any donation beyond that amount will also be gratefully accepted and appreciated.

Be assured that the entire amount of monies donated to SFWS is used strictly to provide for the care and feeding of the wolves/wolf hybrids themselves, and maintenance of the facility, with only a small percentage (15% or less) being used for fundraising purposes. There are no paid staff members at SFWS; every aspect is run entirely by volunteers.

PLEASE PRINT THE FOLLOWING INFORMATION:

NAME(S): _____

MAILING ADDRESS: _____

PHYSICAL ADDRESS (if different - for legality): _____

EMAIL ADDRESS (for newsletters, etc.) _____

PHONE #(s): _____

READ CAREFULLY AND FULLY BEFORE SIGNING:

Being near wild animals such as wolves/wolf hybrids is dangerous and involves inherent risks. Before we can admit you into the outer or inner perimeters with the wolves/wolf hybrids, we require you to carefully read and sign this document. The first part is for you to acknowledge you understand the risks involved and the second part is a release of liability. Your signature below indicates your understanding that all aspects of your participation in this activity are included in the scope of this form. If, after reading this waiver you choose not to sign, you will not be permitted to enter the outer or inner perimeters with the wolves/wolf hybrids.

ACKNOWLEDGMENT AND ASSUMPTION OF RISK

I understand that being in the vicinity of wild animals such as wolves/wolf hybrids is dangerous. I understand and accept any and all of these activities associated with wolves/wolf hybrids expose me to numerous known and unanticipated risks now and in the future which could result in personal injury and other complications resulting from such injury(ies), illness, death, or damage to myself or my property, and other injuries and conditions not named. These risks may increase when I am fatigued, fearful, inattentive, loud, move quickly, or when there are unexpected noise(s) or movement made by me or any outside force whether by man or nature. I also understand that if I am being injured by a wolf/wolf hybrid, there may be no timely rescue.

I have read and voluntarily signed the waiver and I have agreed to assume the entire risk of loss, property damage, illness injury, or death (collectively "losses" now and in the future I may sustain in conjunction with my going near wolves/wolf hybrids, I acknowledge there is inherent danger and are inherent risks involved and I may sustain losses from my participation therein. Pursuant to this release, I voluntarily agree to assume (for myself, my representatives, my heirs and assigns, all such risks, the entire risk of loss, property damage, illness, injury, or death (collectively "losses"), foreseeable or otherwise, and hereby release Saint Francis Wolf Sanctuary, including: all its volunteers, Board of Directors, Council, Jean LeFevre and/or the Estate of John LeFevre, hereafter referred to as the "Releasees," whatever the cause, from responsibility for any losses I may sustain. My assumption of the entire risk of any and all losses to me is intended to apply to any and all losses no matter how the loss(es) is (are) caused. My assumption of the entire risk and any losses to me is intended to cover any loss(es) caused by a negligent act(s) or a negligent failure to act. I release and discharge the Releasees and all persons and entities connected with them from any and all claims that arise as the result of loss, property damage, injury, illness or death to me. My participation is voluntary; I choose to participate in spite of these named and other unnamed risks. I am solely responsible for deciding to engage in this activity, and while participating, for deciding whether to continue this activity.

I have carefully read and understand this acknowledgment and assumption of risk. I also understand I will be asked to read carefully, understand and sign the release of liability that continues.

INITIAL & DATE THIS PAGE _____



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RELEASE OF LIABILITY

I hereby acknowledge I have read the Acknowledgment and Assumption of Risk and have agreed to its terms. I fully understand there is danger inherent in being near wild animals, and that participating in this activity entails risks of loss of life, personal injury and loss of or damage to property.

In consideration of Saint Francis Wolf Sanctuary enabling me to be in close proximity with wolves/wolf hybrids, I hereby voluntarily release and forever discharge the Releasees as defined herein and their officers, agents, and employees, heirs and assigns from any and all liability or claims for any and all injury, illness, death or damage to myself or my property both now and in the future arising out of or in any way connected with my participation in this activity. This release and discharge specifically includes, but is not limited to, liability or claims based upon any and all negligent acts or omissions of the Releasees or their officers, agents or employees and is intended to be as broad and inclusive as is permitted by laws of the State of Texas. I understand and agree it is the intention of the parties to contractually extinguish negligence liability.

I hold the Releasees harmless from any and all liability, actions, causes of actions, debt claims and demands of every kind and nature whatsoever which I now have or which may arise from or in connection with my participation in any other activity thereto. I further agree, promise and covenant not to sue, assert or otherwise maintain any claim against the Releasees or their officers, agents or employees, for any injury, illness, death or damage to myself or my property arising from or in any way connected with my participation in this activity.

In voluntarily signing this document, I fully recognize that if injury, illness, death or damage occurs to me while I am engaged in this activity, I will have no right to make a claim or file a lawsuit against the Releasees or their officers, agents or employees, even if they or any of them negligently cause my injury, illness, death or damage. I further hereby agree that this Release and Waiver of Liability Agreement acts as an affirmative assumption of risk, and extends to all acts of negligence by the Releasees.

I agree that if one part of this waiver and release of liability is found to be invalid, it shall not invalidate any other part of the document. I further agree that if an issue occurs with regard to this waiver/release of liability, it shall be resolved by arbitration.

I hereby certify I have carefully read and understand the acknowledgment and assumption of risk as well as the release of liability, I fully understand their contents, and I fully and voluntarily accept the terms and conditions set forth herein on behalf of myself, my representatives, heirs, assigns and next of kin. I am aware that this is a release of liability and I sign it of my own free will. *I fully understand that I have given up substantial rights by signing this release and I intend my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.*

Signature of Participant

Date

Printed Name of Participant

Date of Birth (if participant is under 18 years of age)

Signature of Parent/Guardian (if participant is under 18 years of age)

Date

Printed Name of Parent/Guardian