



Volunteer / Parental Agreement and Waiver

Given the nature of veterinary medicine and surgery, we cannot control what cases or conditions pets may be present with at The Vet Clinic of Palm Harbor. Volunteers may be exposed visually to medical and surgical procedures, emergency and life-saving measures, sharp objects and instrumentation, blood, urine, feces, and other bodily fluids during the course of their volunteering. We, the undersigned, parents of _____, do hereby give our/my written consent and approval for our said son/daughter to volunteer in this hospital setting and possible exposure to the above situations.

Names, addresses and associated contact information of the pet and/or pet owner are confidential and shall not be used for any purpose and/or shall not be removed from The Vet Clinic of Palm Harbor.

Signed the _____ day of the month of _____, year _____.

(Parent or Guardian Signature)

(Parent or Guardian Signature)

The Signature of Both Parents or Legal Guardians

Required Where Possible