



The little shelter with a big heart.

Student Community Service Form

Community Service Project Submitted By: _____ Date: _____

School Name: _____

School Phone Number: _____

Adult Contact @ School: _____ Grade: _____

Name of Guardian: _____

Guardian's Home Phone: _____

Guardian's Work Phone: _____

Guardian's Cell Phone: _____

Student Home Address: _____

Student' Email Address: _____ Student Date of Birth: _____

Student Cell Phone: _____

Hours needed for completion of project: _____

Project Name: _____

Project Description: _____

I, the undersigned, hereinafter referred to as Releasor, on the date written below do hereby release, waive and forever hold harmless the Lakes Region Humane Society, hereafter referred to as LRHS, from any and all claims, injuries or harm suffered at any time, for any reason while on LRHS property. This release shall be binding on the Releasor, his/her assigns, executors, administrators, conservators or guardians. Releasor hereby acknowledges that by entering the LRHS grounds or facility a risk of possible injury from contact with the animals is present. **By signing below Releasor agrees to accept ALL liability for any bites, scratches, falls and general accidents or injuries they may obtain while at LRHS.** Releasor also agrees that, if visiting with a minor, the act of signing yourself in will legally indicate that you agree to accept ALL liability and responsibility for that minor(s) while at LRHS.

Student Signature: _____ Date: _____

School Contact Signature: _____ Date: _____

Parent's Signature (if Student is under 18 y/o): _____ Date: _____