

**Saint Peter Police Department**  
**207 South Front Street**  
**St. Peter, MN 56082-2592**  
**Ph: (507) 931-1550 Fax: (507) 934-1699**

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**RELEASE WAIVER AND INDEMNITY AGREEMENT  
FOR PARTICIPATION IN INHERENTLY DANGEROUS ACTIVITY**

Release executed on \_\_\_\_\_, by \_\_\_\_\_, herein referred to as releaser.  
(date) (print name)

In consideration of being permitted to participate in police activities as a pound pal, for him/herself, for legal representative, heirs or assigns, hereby **RELEASES, WAIVES AND DISCHARGES** the City of St. Peter, the St. Peter Police Department, and The Kind Veterinary Clinic their officers and members and each of them, their officers and employees, referred to as releasees, **FROM ALL LIABILITY** to the releaser, his spouse, legal representatives, heirs and assigns, **FOR ANY AND ALL LOSS OR DAMAGE, AND ANY CLAIM OR DAMAGES RESULTING THEREFROM, ON ACCOUNT OF INJURY TO RELEASER'S PERSON OR PROPERTY, EVEN INJURY RESULTING IN DEATH OF THE RELEASOR, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASES OR OTHERWISE** while the releaser is for any purpose participating in pound activities or while on City property or Kind Veterinary Clinic property in connection with pound pal activities.

**IT IS UNDERSTOOD THAT BY THIS RELEASE WE INTEND TO INCLUDE CLAIMS FOR ALL PERSONAL INJURY AND DEATH, EVEN THOUGH UNKNOWN TO US AT THE PRESENT TIME.**

Releaser agrees to indemnify the releases and each of them from any loss, liability, damage or cost they may incur due to the presence of releaser during any pound activities or while on city property or Kind Veterinary property in connection with pound pal activities.

**RELEASER HEREBY ASSUMES FULL RESPONSIBILITY** for the risk of bodily injury, death or property damage due to the negligence of releases or otherwise while participating as a pound pal while on City or Kind Veterinary property in connection with pound pal activities.

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

**IN WITNESS WHEREOF**, releaser has executed this release at Kind Veterinary Clinic the day and year first above written. (location)

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_  
**WITNESS**

\_\_\_\_\_  
**PARENT SIGNATURE**