



F L A P

FLAP Volunteer Acknowledgement of Risk

I, _____, hereby acknowledge and consent as follows:

1. I acknowledge that the bird rescuing activities of FLAP (Fatal Light Awareness Program), being usually conducted late at night and early in the morning in the downtown core area, are associated with risks such as those related to traffic, assault, contagion from the animals handled, and others. I accept responsibility for these risks, recognizing that the common goals and limited means we share together in FLAP do not enable FLAP or its members to do more than make me aware of these risks as they have come to learn of them through their activities, and through reasonable inquiries.
2. In exchange for other participants waiving any rights of action against FLAP or its members and volunteers (myself included) for such risks, I myself waive such right of action. I do this in order to make possible the worthwhile collective activities we engage in.
3. I possess, have read and understand the publication entitled, *Fatal Light Awareness Program Training Handbook*. I undertake to abide by it and any other reasonable rules and guidelines set down by FLAP from time to time.
4. I acknowledge that I am in good health and have no illnesses that may affect my immune system.
5. I acknowledge, if using a personal motor vehicle for FLAP activities, that I hold appropriate automobile insurance coverage and I accept responsibility for verifying that any operation or use I make of vehicles in activities related to bird rescue has no adverse impact on my eligibility for coverage under any vehicle insurance policies I am a party to.
6. (Where volunteer is over 18 years of age)
When engaging in bird rescue activities with persons who are under the age of 18, I shall ensure that myself and other adults properly supervise such persons. I acknowledge that such responsibility, if neglected, could result in legal liability against me.

Signature of Volunteer

Signature of Witness

Date

Date