



Bountiful Bowls Pick-up and Waiver

Pick-up Date _____

Person Picking up Food _____ Id Verified _____

- ❖ Person picking up food and identification must match the application submitted
- ❖ Provide proof of current rabies vaccination and spay/neuter surgery for all animals listed on application if not provided with original application
- ❖ I understand the food provided varies depending on donations received each month therefore pets may experience GI upset due to the change in diet each month.
- ❖ I understand that the food received through this program is donated from various sources; HSJC cannot guarantee the quality or freshness of the food.
- ❖ I understand that HSJC will make every effort to pull food from the program if we are aware of a possible recall. HSJC makes no guarantee that food given away through Bountiful Bowls is free of manufacturer recalls.

I hereby waive, release and discharge myself, my heirs, personal representatives and assigns any and all rights, liability, causes of action and claims that may now or hereafter accrue to me or which I may now or hereafter assert against the Humane Society of Jackson County, its officers, directors, employees, agents, successors and assigns for any injury, harm or loss suffered by me, my family or an animal related to or arising from my use of pet food provided by the Bountiful Bowls program.

Signature _____ Date _____

# Cans or Pounds	Brand	Description