

AVTAA - Waiver Release and Indemnity

I hereby submit my credentials to the Academy of Veterinary Technicians in Anesthesia and Analgesia for consideration for recredentialing every 5 years from the date I became an AVTAA member. I agree that the AVTAA Board of Regents may investigate my standing as a technician, including my reputation for complying with the standards of ethics of the profession. I understand and agree that I will continue to pay annual AVTAA dues.

I agree to abide by the decisions of the Board of Regents and thereby voluntarily release, discharge, waive and relinquish any and all actions or causes of actions against the Academy of Veterinary Technicians in Anesthesia and Analgesia and each and all of its members, regents, officers, examiners and assigns from and against any liability whatsoever in respect of any decisions or acts that they may make in connection with this application for recredentialing and/or the granting or issuance, or failure thereof, of any certificate, except as specifically provided by the Constitution and Bylaws of this organization. I agree to exempt and relieve, defend and indemnify, and hold harmless the Academy of Veterinary Technicians in Anesthesia and Analgesia, and each and all of its members, regents, officers, examiners and assigns against any and all claims, demands and/or proceedings, including court costs and attorney's fees, brought by or prosecuted for my benefit, extended to all claims of every kind and nature whatsoever whether known or unknown at this time. I further agree that my certificate granted and issued to me shall be and remain the property of the Academy of Veterinary Technicians in Anesthesia and Analgesia.

I certify that all information provided by me on the recredential application is true and correct. I acknowledge that I have read, understand and agree to abide by the above two paragraphs.

(Signature)

(Date)

(Please print your name)