

Volunteer Application

Please return to the Marion County Humane Society Animal Shelter

| Name: | | | Date of Birth: | |
|--------------------|----------|-----------|----------------|--|
| Address: | | | Phone # | |
| City/State/Zip: | | | Cell # | |
| Email: | | | Work# | |
| Emergency Contact: | | | Phone# | |
| Age: | () adult | () 14-18 | () under 14 | |

(Note: An adult volunteer or legal guardian must accompany volunteers under 14 at all times)

<u>Waiver</u>

Thank you for taking the time out of your busy schedule to volunteer to help find homes for the animals being fostered at the Marion County Humane Society No Kill Shelter. During your volunteer experiences with the MCHS, you will be handling all size and shapes of animals. We ask that you use your best judgment. If you are in doubt or need any assistance, please call on the Head Volunteer or staff members of the MCHS to assist you,

You, ______ (name) the said volunteer, agree that the MCHS (including any of its representatives), is not responsible for any injuries acquired during your volunteer time with the organization. This includes volunteering at any location where a MCHS event is taking place. The MCHS is not responsible for the welfare of children and teenagers while volunteering for the MCHS.

Please read this carefully and sign your name below. (Signature of Parent/Legal guardian for volunteers under age 18.)

| , agree to the above statements. |
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| Previous Volunteer Experience: | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| Do you have pets: If yes, please describe: | | | | |
| Experience with animals: | | | | |
| Days and times available to volunteer: | | | | |
| Duties of interest (Please check all that apply): | | | | |
| () Fundraising events () Fostering animals () Grant writing () Office work | | | | |
| () Adoption centers () Transporting animals () Public relations () Maintenance | | | | |
| () Emergency transport () Animal socialization/training () Carpentry/painting/repairs | | | | |
| () Landscaping/gardening () Other, please specify | | | | |
| Rules and Regulations for the MCHS Volunteers at Adoption Events: When you arrive, you must sign in and you must sign out when you leave. You must check with your supervisor before leaving your assigned post. No open-toe shoes. Wear sneakers or boots, long pants or appropriate length shorts. Wear a MCHS t-shirt Wear an identifying nametag When events are held at a business/store (Wal-Mart, etc.), do not sit on items, ladders or on the floor inside or outside. No horseplay or running around. Clean up after yourself, especially in employee lounge. Be polite at all times especially to employees of the business/store that has invited us to host our event on their property – they are our partners and they make it possible for us to get homes for the animals. | | | | |

- 9. We recommend you eat before you come, or bring food with you.
- 10. Use your best judgment when volunteering; you are a representative of the MCHS.

For those who desire volunteering at the MCHS shelter, nos. 1,3,7,10 above apply. In addition, you must meet with the Director for your volunteer assignment and for additional information, rules and regulations.

As a volunteer for the MCHS, I agree to abide by the rules stated above.

Signature: Printed name:

Note to Parents/Guardians of ALL volunteers under the age of 18:

In working with the dogs inside the runs/cages, there is a possibility of the dogs becoming difficult. In these instances, there is a risk that they may bite. Please sign below that you understand the risk and that you hold the MCHS and its representatives harmless.

Parent signature

Date

I give permission for myself or my child to be photographed or videotaped for use in promotional publications such as newspaper, television, fliers, posters and website publication.