



Volunteer Application & Release

First State Animal Center and SPCA is a non-profit animal rescue organization. The information provided to First State Animal Center by completing this form will enable us to direct you towards an appropriate, rewarding experience. Please complete all of this form and return to First State Animal Center. All volunteers must be 17 (seventeen) years of age or older and have parent or guardian approval under the age of 18.

Personal Information-

Name- _____

Address- _____

Cell Phone- _____ Home Phone- _____

Email- _____

Name of Parent/Guardian if under 18 and Emergency Contact-

Name- _____ Relationship- _____

Primary Phone- _____ Secondary Phone- _____

Volunteer Profile-

Please describe any present or past volunteer work:

Organization- _____

Position- _____

What type of animal experience do you have? _____

Availability

Circle the days you can volunteer.

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

What hours are you available to volunteer?

Weekdays- _____

Weekends- _____

Do you have any allergies or physical conditions that might affect your volunteer work?

If so, please describe- _____

Which location would you prefer to volunteer at?

Animal Shelter _____ Rescue Thrift Store _____ Rescue Barn _____

Which species are you most comfortable working with and handling?

Cats _____ Dogs _____ Other _____

Please check any areas in which you would like to participate-

- Special Fundraising events
- Adoptions (special off site adoption events)
- Community involvement
- Shelter Care (am/pm animal care/cleaning, dog walking general housekeeping)
- Grooming animals (bathing, brushing, etc.)
- Leash training/walking.
- Training/Teaching commands
- General socialization
- Barn Hand
- Thrift Store
- Laundry
- Yard work/building maintenance

Do you have any special skills, training, interests or hobbies you would like to share?

Volunteer Agreement

I, _____ agree to the following terms and conditions presented below and shall be legally bound to them.

- I will abide by the mission, rules, regulations, policies and programs of First State Animal Center while I am a volunteer.
- I will not engage in any unsafe, illegal, or unethical activities while acting as a First State Animal Center volunteer.
- As a condition of volunteering, which I acknowledge to be adequate consideration, I also agree to enter into an additional confidentiality agreement as well as a waiver of liability with this volunteer agreement.

The above conditions have been reviewed with me and I understand that failing to uphold them is sufficient grounds for First State Animal Center to request and implement my removal as a volunteer.

Volunteers Signature- _____ Date- _____

Parent/Guardian Signature (if under 18)- _____

Confidentiality Agreement

Information concerning the management and operation of our organization is generally not known to the public and should be kept confidential. The following guidelines have been developed for this purpose.

Guidelines for protecting confidentiality.

- Confidential information should only be shared with those inside the organization whose jobs require them to have access to the information or when the law requires or protects the release of such information.
- Board Members, Employees, or Volunteers should not disclose sensitive or non-public information to people outside the organization or discuss it in public places.
- Documents containing sensitive information- including information stored on computer systems- should be handled carefully and must be properly stored.

I have read and understand the above and agree to comply with the First State Animal Center and SPCA's Confidentiality Agreement.

Signature- _____ Date- _____

Liability Release Waiver

- I recognize that while performing my services in a voluntary capacity in handling animals there may be a risk of injury. On behalf of myself, my heirs, and personal representatives I hereby release and hold harmless First State Animal Center and SPCA, its Board of Directors, agents, and employees from any and all claims, causes of action or demands of any nature or cause connected to my volunteer service.
- I also agree to release and hold First State Animal Center harmless for any and all damages to my personal property while performing my volunteer services.
- If I am signing this release form as a parent or legal guardian of a minor volunteer (under 18 years of age), I hereby give my consent to allow my child to volunteer services for the First State Animal Center. I agree to hold First State Animal Center and SPCA harmless for any claim, loss, or injury incurred by such child.
- I acknowledge that I have read and fully understand the terms and conditions of the foregoing liability release waiver.

Signature- _____ Date- _____

Parent/Guardian Signature (if under 18)- _____