

WATERTOWN HUMANE SOCIETY VOLUNTEER APPLICATION



PLEASE PRINT CLEARLY (must be 16 years or older to volunteer)

Legal Name: _____ Birth Date: _____
Last First Middle

Parent/Guardian Information: (required if child is a minor)

Last First Middle

Home Address: _____

City: _____ State: _____ Zip: _____

Email (email is our preferred method of contact): _____

Phone (Home): _____ Cell: _____ Work: _____

Emergency contact: Name _____

Phone number _____ Relationship _____

Occupation/Employer: _____

Are you retired? Yes No

Are there any medical conditions that may affect your ability to perform certain tasks:
 Yes No If yes, please explain: _____

Have you ever been convicted of a misdemeanor or felony? Yes No

If yes, please explain _____

Do you have any previous volunteer experience? Yes No

If yes, please explain: _____

How did you hear about our volunteer program? _____

Please share with us why you are interested in volunteering at the Watertown Humane Society:

What length of time are you willing to commit to volunteering (please note that we require at least a 6 month commitment due to time spent on training/orientation):

6 months 1 year long term (over 1 year)

What areas of volunteering are you interested in?

- Animal Assistant – clean cages, feed & water animals.
- Animal Socialization – dog walking; play with cats, kitten and puppies; groom and otherwise assist with care for the animals.
- Gardening & Maintenance – if you have a green thumb or have carpentry/maintenance skills, we would like to talk to you. Maintenance and gardening needs are not seasonal, but ongoing year-round.
- Fundraising Assistant – assist shelter board members and staff with various fundraising activities such as raffles, bake sales, dog wash, etc.
- Special Events Assistant – work closely with shelter board members to coordinate various special events.

Availability (please indicate the days and times you are usually available to volunteer):

| Specific Times | Sun | Mon | Tues | Wed | Thu | Fri | Sat |
|------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Morning: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Afternoon: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Evening: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Do you have any experience at/with the following?

- Animal Groomer Animal Shelter Boarding Facility Bottle Feeding
- Dog Obedience Training Fostering Cats/Dogs Pet Sitting Vet Clinic

Volunteering at the Watertown Humane Society requires contact with the general public. Are you comfortable with this? Yes No

Watertown Humane Society does not have “time limits” on adoptable animals, but occasionally we must euthanize animals that become ill or have behavior issues. How do you feel about this?

Provide two references that can attest to your character, skill and dependability:

Name _____ Phone # _____
Name _____ Phone # _____

UNDERSTANDING, AGREEMENT & RELEASE:

In consideration of being permitted to participate as a volunteer with the Watertown Humane Society (WHS) and in consideration of the mutual promises of the parties, the Volunteer and/or their parent or guardian makes the following commitments/agreements:

- 1) As a volunteer I understand that my role at WHS is to assist the staff in caring for homeless and needy animals. I also recognize that the staff and management make all decisions regarding the disposition of animals, up to and including euthanasia. Questions regarding these decisions are to be addressed by the Executive Director.
- 2) As a volunteer I agree to serve without compensation or pay for such period or periods as mutually agreed upon by the parties.
- 3) Volunteer and/or their parents/guardians understand and agree to WHS's use of pictures containing volunteers on their website and/or in publications chosen to promote its shelter.
- 4) Volunteers and/or their guardian assumes full responsibility for all risks of loss or damage or injuries that may be suffered by the Volunteer, his/her spouse, legal representatives, heirs and assigns, or to property owned by the Volunteer or in his/her custody in the course of activities on behalf of WHS from any cause, including but not limited to, ordinary negligence attributed to or which might be sustained or suffered at any premises under the control of WHS or any other premises not under the control of WHS, or when en route to or from such places or premises.
- 5) Volunteer and/or their parents or guardians hereby discharge and indemnifies WHS and its agents, directors, officers, employees and other volunteer workers of and from and in respect to any and all claims, actions, and rights of causes of action, present or future, whether known, anticipated, unanticipated, on account of any personal injury, including death, or loss of, or damage to any assigns from any cause incident to arising out of, during, or in connection with Volunteer's performance or Volunteer's services at the place or places and in the performance or activities as are described in this agreement.
- 6) The representations, conditions, and commitments contained in this instrument shall be binding upon the Volunteer's parents, heirs, legal representatives and assigns.
- 7) This agreement contains the entire agreement between the parties hereto and the terms are contractual and not a mere recital.
- 8) Volunteer and/or the parents/guardians further state that he/she has carefully read the foregoing Release and know the contents thereof and sign this Release freely and voluntarily.
- 9) By signing this document, Volunteer and/or the parents/guardians are stating that all the information given herein is accurate and complete and do hereby give consent for WHS to verify any and all information contained herein.

_____ **Volunteer Signature**

_____ **Parent/Guardian Signature (if minor)**

_____ **Date**

_____ **WHS Volunteer Coordinator Signature**

Date of Orientation _____

Date of Training _____

Comments _____
