



Volunteer Application

At the Humane Society of Garland County, we encourage volunteer participation of those people who have a desire to support our purpose and are willing to be interviewed and trained. The information provided by completing this profile will enable us to direct you towards the most appropriate, rewarding volunteer opportunity. Thank you!

Name _____

(Last Name) (First Name) (M.I.)

Home Address _____

(Address)(City/State/Zip)

Social Security #: ____/____/____ **Birthdate:** _____ **Email :** _____

Home Phone #: _____ **Work Phone # :** _____

When is the best time to reach you? _____

In case of emergency, please contact (Name) _____ **(Phone)** _____

How did you hear about our volunteer opportunities? _____

What is your primary interest in volunteering at the Shelter? _____

Do you have any previous experience working with animals? Yes ____ No ____

If yes, list any relevant experience (please include any pets you may currently have) _____

Are you a student? Yes ____ No ____

How many hours per week are you available to volunteer? _____

Do you have any previous volunteer experience? Yes ____ No ____

Please list any areas of interest you may have as a volunteer candidate: _____

Do you possess a valid AR driver's license? Yes ____ No ____

If you possess a valid driver's license, are you willing to use your vehicle to transport animals (in carriers) as part of your work for the shelter? Yes ____ No ____

AS A VOLUNTEER FOR THE HSGC, I FULLY UNDERSTAND THAT THE SHELTER DOES NOT PROVIDE VOLUNTEERS WITH MEDICAL, WORKERS' COMPENSATION, OR AUTOMOBILE LIABILITY INSURANCE COVERAGE.

Have you ever been convicted of a crime excluding minor traffic offenses and juvenile adjudication's? Yes ____ No ____

If yes, please explain: _____

I confirm that all information supplied on this profile is true and correct. I also acknowledge that the Humane Society of Garland County retains the right to terminate my volunteer involvement at any time in the discretion of the Director, Volunteer Coordinator, or Shelter Manager.

Signature _____ **Date** _____

MINOR VOLUNTEER RELEASE

(17 years or younger)

I, _____, being the parent or legal guardian of _____ (the "Minor") hereby consent to and authorize the Minor to act as a volunteer for The Humane Society of Garland County. I acknowledge and agree that activities performed by the Minor as a volunteer will be performed strictly on a voluntary basis, without any pay or compensation benefits. I agree and understand that the Minor must comply with the rules and regulations established from time to time by the Shelter and failure to do so may result in the Minor's immediate removal as a volunteer. I am aware of the nature of the activities to be performed by the Minor as a volunteer and recognize that in handling animals and performing other volunteer tasks, a risk of harm, injury, illness or disease exists, including physical harm, illness or disease caused by animals. I agree that all volunteer activities are to be performed by the Minor at the Minor's risk and I assume full responsibility therefore. I understand public relations are an important part of volunteering at the Shelter. I consent to and authorize the HSGC to use any photographs taken of the Minor for public relations. On behalf of myself and the Minor and our respective heirs and personal representative, I agree not to hold or attempt to hold the Humane Society of Garland County, their officers or employees responsible for any injury or damage sustained or incurred by the Minor arising out of or in any way connected with the Minor's activities as a volunteer for the HSGC and hereby release and discharge the HSGC, their officers and employees from any and all claims, demands, causes of action of any nature or cause, for any such injury or damage incurred or suffered by the minor.

Signature of Volunteer _____ **Date** _____

ADULT VOLUNTEER RELEASE

(18 years or older)

I, _____, agree to act as a volunteer for the Humane Society of Garland County I acknowledge and agree that activities performed by me as a volunteer will be performed strictly on a voluntary basis, without any pay, compensation or benefits, including without limitation, workers' compensation benefits. I agree to comply with the rules and regulations established from time to time by the HSGC and understand my failure to do so may result in my immediate removal as a volunteer. I am aware of the nature of the activities to be performed by me as a volunteer and recognize that in handling animals and performing other volunteer tasks, a risk of harm, injury, illness or disease exists, including physical harm, illness or disease caused by animals. I agree that all volunteer activities are to be performed by me at my risk and I assume full responsibility therefore. I understand public relations are an important part of volunteering at the HSGC. I consent and authorize the HSGC to use any photographs taken of me for public relations purposes. On behalf of myself, my heirs and personal representatives, I agree not to hold or attempt to hold the HSGC, their officers or employees responsible for any injury or damage sustained or incurred by me arising out of or in any way connected with my activities as a volunteer for the HSGC and thereby release and discharge the HSGC, their officers and employees from any and all claims, demands, causes of action of any nature or cause, for any such injury or damage incurred or suffered by me.

Signature of Volunteer _____ **Date** _____

Signature of Volunteer Coordinator _____ **Date** _____