

Polk County Humane Society

PO Box 334, Bolivar, MO 65613 • Phone: 777-DOGS (3647) • www.polkcountyhumanesociety.org



Volunteer Application

Name: _____

Address: _____

City: _____ State and Zip Code: _____

Mobile Phone: _____ Home Phone : _____

E-mail: _____ Date of Birth*: ___/___/___

**Please note that you must be 16 years of age to volunteer.*

Emergency Information

Emergency Contact Name: _____

Relationship to You: _____ Phone: _____

Volunteer Background and Interests

Do you have experience working with animals? Yes No If so, please explain:

Why are you interested in volunteering with PCHS?

Please list the day(s) and time(s) you would be available to volunteer:

We have volunteer opportunities that occur every day, every weekend, and occasionally. Please circle any and all areas of interest to you.

Every Day: Shelter Animal Care / Office Help / GTTD Resale Store

Every Weekend: PetsMart Adoption Events (usually on Saturdays)

Occasional: Fundraising / In and Out-of-Area Transports / Foster Parent

For more information on our volunteer opportunities, visit our Web site at www.polkcountyhumanesociety.org or our Facebook page at www.facebook.com/pchsbolivar. For questions, please e-mail GoingToTheDogs1@windstream.net.

Signature: _____ Date: _____

Please mail your completed application to:

**PCHS-Bolivar
PO Box 334
Bolivar, MO 65613**

Thank you!

Polk County Humane Society
Volunteer Agreement and Release

1. I understand that volunteers must be at least 16 years old.
2. I understand that I may be handling animals while providing my volunteer services for Polk County Humane Society-Bolivar and therefore there exists a risk for personal injury. On behalf of myself, my heirs, personal representatives, and executor, I release, discharge, indemnify and hold harmless Polk County Humane Society-Bolivar, its agents, servants, and employees from any and all claims, causes of action, or demands of any nature or cause connected with my volunteer contract. This could include any costs, attorney's fees, and court costs incurred by Polk County Humane Society-Bolivar in connection with my volunteer services based on damages or injuries which I may incur in any way while volunteering. Such damages are not limited to but may include animal bites, accidents, injuries, and personal property damage.
3. I agree to release, discharge, and hold Polk County Humane Society-Bolivar harmless for any and all damage to my personal property while providing my services on a voluntary basis to Polk County Humane Society-Bolivar, its agents, servants, and employees.
4. I understand that public relations are an important aspect of volunteer work at Polk County Humane Society-Bolivar. I, therefore, agree to allow Polk County Humane Society-Bolivar and its agents to use any photographs, video, or film taken of me for use in public relations efforts. Polk County Humane Society-Bolivar will use all reasonable efforts to notify me but notification is not required for the photographs, video, or film to be used for public relations purposes.

I (print name) _____ **HAVE READ AND FULLY UNDERSTAND THE TERMS AND CONDITIONS OF THIS VOLUNTEER AGREEMENT AND I WILLINGLY COMPLY WITH ALL OF ITS CONDITIONS.**

Parent or Legal Guardian of Volunteers Under 18 Years

As a parent or legal guardian of the above named Potential Volunteer, I hereby consent to my child/ward becoming a volunteer for the Polk County Humane Society-Bolivar and performing volunteer services as described in the Volunteer Agreement. I also acknowledge that I have read the above Release and that I fully understand its terms and conditions. For myself and my child/ward, I agree to all of the terms and conditions of the Volunteer Agreement and Release.

Volunteer Signature

Date

Parent or Legal Guardian if Under 18 Years Old

Date

PCHS Representative Signature

Date