



Bartholomew County Humane Society

VOLUNTEER INFORMATION & APPLICATION

Last Name _____ Date _____

First Name _____ Nickname _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Best Time to Call _____

Alternate Phone _____ Best Time to Call _____

(please specify work, cell, etc.)

E-mail _____

Available Start Date: _____

Are you over 14? (please circle) Yes No

(If you are between 12 and 14 years old you must have a parent/guardian on the premises with you when you volunteer.)

Why are you interested in becoming a volunteer at BCHS? _____

Please describe any previous experience working with animals. _____

Please list any health restrictions that would limit your ability to perform duties (i.e., allergies, mobility)?

List any additional information that may be useful (i.e., special skills, training, interests, hobbies).

Please check the areas in which you are interested:

- | | |
|--|---|
| <input type="checkbox"/> Cat Care | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Dog Care | <input type="checkbox"/> Grants |
| <input type="checkbox"/> Adoption Follow-Up | <input type="checkbox"/> Monetary Solicitation |
| <input type="checkbox"/> Lost & Found | <input type="checkbox"/> In-Kind Donation Solicitation |
| <input type="checkbox"/> Office Assistant | |
| <input type="checkbox"/> Breed Rescue Assistant | <input type="checkbox"/> Membership Assistant |
| <input type="checkbox"/> Animal Transporter | |
| <input type="checkbox"/> Nursing Home Visitation | <input type="checkbox"/> Special Event &/or Special Project Volunteer |
| <input type="checkbox"/> Pet Advertising Liaison | |
| <input type="checkbox"/> Media Outreach | <input type="checkbox"/> <i>Any Team – I just want to volunteer!</i> |

Please indicate how much time you anticipate being able to volunteer.

- | | |
|---|--|
| <input type="checkbox"/> 1-2 hours/week | <input type="checkbox"/> 9-10 hours/week |
| <input type="checkbox"/> 3-4 hours/week | <input type="checkbox"/> 10+ hours/week |
| <input type="checkbox"/> 5-6 hours/week | <input type="checkbox"/> Other |
| <input type="checkbox"/> 7-8 hours/week | |

Please indicate the days and times you expect to be able to volunteer.

- | | |
|--|--|
| <input type="checkbox"/> Sunday _____ | <input type="checkbox"/> Friday _____ |
| <input type="checkbox"/> Monday _____ | <input type="checkbox"/> Saturday _____ |
| <input type="checkbox"/> Tuesday _____ | |
| <input type="checkbox"/> Wednesday _____ | <input type="checkbox"/> Special Events Only |
| <input type="checkbox"/> Thursday _____ | <input type="checkbox"/> Special Projects Only |

Emergency Contact & Relationship _____

Phone Number/s _____

The Bartholomew County Humane Society is pleased to accept contributing volunteers ages 14 and older.

Volunteers must be 14 or older in order to volunteer at the shelter without a parent or guardian.

Volunteers 18 and older must sign a Waiver and Release of Liability.

Volunteers under the age of 18 must have a parent sign a Waiver by Parent for Minor-age Volunteer.

Waiver and Release of Liability

I, the undersigned, understand that the behavior of domestic animals is sometimes unpredictable and that some domestic animals are capable of inflicting serious personal injury or death, as well as extensive property damage. Knowing the risks of handling domestic animals, I agree to assume those risks and to release, indemnify, and hold harmless the Bartholomew County Humane Society and/or its officials, directors, supervisors, employees for any and all personal injury and property damages resulting from my volunteer work.

I understand that I must attend a mandatory Volunteer Orientation either as part of a group or individually. I further understand that I will be trained according to my volunteer interests and that documentation will be kept as I progress.

I have read, understood, and agree to the above.

Volunteer Name (print) _____

Signature _____

Date _____



Thank you for your interest in
volunteering with us!



Waiver by Parent for Minor-age Volunteer

I, _____ am the parent/legal guardian of
_____ who is aged _____ years.

I understand that this child will volunteer with the Bartholomew County Humane Society, and in the course of such volunteer work, this child may have direct contact with domestic animals.

I further understand that the behavior of domestic animals is sometimes unpredictable and that some domestic animals are capable of inflicting serious personal injury or death, as well as extensive property damage. Knowing the risks of handling domestic animals, on behalf of the child and myself, I agree to assume those risks and to release, indemnify, and hold harmless the Bartholomew County Humane Society and/or its officials, directors, supervisors, employees for any and all personal injury and property damages resulting from said child's volunteer work.

I give the Bartholomew County Humane Society authority to seek emergency medical treatment for said child, if necessary. I understand that, in the event of an accident while said child is performing volunteer services, I am responsible for any and all medical costs incurred.

I know of no medical or any other condition which would prevent said child from volunteering at the Bartholomew County Humane Society.

Parent/Guardian Name (print) _____

Signature _____

Relationship to Minor _____

Date _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____

Alternate Phone _____

(please specify work, cell, etc)