



## Volunteer Application

<b>Contact Information:</b>	
Name	
Street Address	
City, State, Zip Code	
Home Phone	
Work Phone	
Cellular Phone	
Email Address	

<b>Availability – During which days and hours are you available for volunteer assignments?</b>	
Sunday	
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	

<b>Interests – Tell us which areas you are interested in volunteering:</b>	
<input type="checkbox"/> Administration	Other interests (please list other things you would be interested in volunteering ):
<input type="checkbox"/> Adoption Events	
<input type="checkbox"/> Adoption Home Visits	
<input type="checkbox"/> Awareness Events	
<input type="checkbox"/> Foster Coordination	
<input type="checkbox"/> Foster Home Visits	
<input type="checkbox"/> Fundraisers	
<input type="checkbox"/> Shelter Feeding and Cleaning	

<b>Special Skills or Qualifications – Summarize special skills and qualifications you have acquired from employment, previous volunteer work or through activities, hobbies, or sports:</b>

<b>Previous Volunteer Experience – Summarize your previous volunteer experience:</b>

<b>Person to Notify in Case of Emergency:</b>	
Name	
Street Address	
City, State, Zip Code	
Home Phone	
Work Phone	
Cellular Phone	
Email Address	

<b>How did you hear about us – we would love to know how you heard about Safe Haven and what made you interested in volunteering with us:</b>

BY SIGNING THIS AGREEMENT YOU ARE GIVING UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO RECOVER DAMAGES IN CASE OF INJURY, DEATH, OR PROPERTY DAMAGE, ARISING OUT OF YOUR PRESENCE AND/OR PARTICIPATION AT SAFE HAVEN FOR ANIMALS, INCLUDING INJURY, DEATH, OR PROPERTY DAMAGE ARISING OUT OF THE NEGLIGENCE OF SAFE HAVEN FOR ANIMALS.

**READ THIS AGREEMENT CAREFULLY BEFORE SIGNING IT. YOUR SIGNATURE INDICATES YOUR UNDERSTANDING OF AND AGREEMENT TO ITS TERMS.**

By signing this form, I hereby acknowledge that I have familiarized myself with the activities that I will be allowed to participate in, and that I do hereby acknowledge and agree that I will participate in these activities without restriction or limitation. I recognize the inherent risks involved in working with an animal shelter, including but not limited to:

- **Bites or scratches from animals.**
- **Scratches or other injury from cages.**
- **Scratches or other injury from grooming tools.**
- **Allergic reactions to animals, cleaning agents, chemicals, or other allergens.**
- **Tripping or slipping on wet floor, cats, toys, etc.**
- **Slipping, falling, or otherwise being injured anywhere on the premises.**

I hereby specifically forever waive and release Safe Haven for Animals and its principals, agents and volunteers from any liability for injury arising out of the inherent risks from working in an animal shelter, as set forth in a non-exclusive fashion previously herein, as well as from the active negligence of Safe Haven for Animals, its principals and agents.

By placing my initials beside each of the paragraphs below, I hereby acknowledge my complete understanding of the information provided; by placing my initials beside each of the paragraphs below, I do hereby consent to my participation in the activities at Safe Haven for Animals, without restriction, without liability to Safe Haven for Animals, its principals or agents, and with full knowledge and understanding of the disclosures herein.

Please read	Initial here:
No medications of any kind, whether prescription or non prescription, will be given to you while at Safe Haven for Animals.	
I am in good health and do not present a health risk to others who may be present at Safe Haven for Animals.	
I do not have any communicable diseases, including, but not limited to Mumps, Measles, Chicken Pox, Hepatitis, HIV/Aids	
I agree to indemnify, save and hold harmless Safe Haven for Animals and its principals, agents and volunteers from and against any loss, liability, damage, attorneys' fees, or costs that they may incur arising out of or in any way connected with either my presence or participation at Safe Haven for Animals or any acts or omissions of Safe Haven for Animals' principals, agents or volunteers.	
I acknowledge that although there will not be a nurse on the premises and Safe Haven for Animals and its principals, agents and volunteers bear no responsibility for me.	
By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in immediate dismissal.	

Name: \_\_\_\_\_  
 Adult Participant's Signature or Parent/Guardian Signature (if child is under 18)

Date of Birth \_\_\_\_\_

Date: \_\_\_\_\_