

**VOLUNTEER APPLICATION & AGREEMENT**

NAME \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

EDUCATION: Highest grade completed \_\_\_ Grade school \_\_\_ High School \_\_\_ College \_\_\_ Other \_\_\_\_\_

EMPLOYMENT: Present Employer \_\_\_\_\_ How Long \_\_\_\_\_

Position \_\_\_\_\_

What previous experience do you have working with animals? \_\_\_\_\_

**AREAS OF INTEREST**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Office and reception      | <input type="checkbox"/> Dog Kennel Cleaning   | <input type="checkbox"/> Cat Kennel Cleaning  |
| <input type="checkbox"/> Cat Socialization         | <input type="checkbox"/> Dog Socialization     | <input type="checkbox"/> Dog Walking          |
| <input type="checkbox"/> Thrift Shop Sales Person  | <input type="checkbox"/> Thrift Shop Donations | <input type="checkbox"/> Foster Care          |
| <input type="checkbox"/> Fund Raising              | <input type="checkbox"/> Facilities Care       | <input type="checkbox"/> Yard Care            |
| <input type="checkbox"/> Special Events & Projects | <input type="checkbox"/> Pet Obedience         | <input type="checkbox"/> Grooming/Bathing     |
| <input type="checkbox"/> Data Entry                | <input type="checkbox"/> Pet Therapy           | <input type="checkbox"/> Transporting Animals |

**TIME COMMITMENT**

NHS programs request that each volunteer donate a minimum of two volunteer hours per week for six or more (some exceptions on some jobs). This commitment is necessary because NHS strives to provide high quality service that can only be provided through the continued support of TRAINED volunteers. It takes time and resources to train volunteers for individual positions.

**AVAILABILITY FOR VOLUNTEERING Monday/Saturday 7:30am TO 3:00pm**

- |                                    |                   |
|------------------------------------|-------------------|
| <input type="checkbox"/> Monday    | What Hours? _____ |
| <input type="checkbox"/> Tuesday   | What Hours? _____ |
| <input type="checkbox"/> Wednesday | What Hours? _____ |
| <input type="checkbox"/> Thursday  | What Hours? _____ |
| <input type="checkbox"/> Friday    | What Hours? _____ |
| <input type="checkbox"/> Saturday  | What Hours? _____ |

**CODE OF ETHICS**

- Being a volunteer requires that you keep information concerning NHS, its clients, employees, procedures, and suppliers and animals confidential.
- Your personal conduct (on and off the job) should reflect favorably on you and NHS.
- You may not make derogatory remarks or engage in negative behavior with respect to clients, other volunteers, or staff members.
- Dress guidelines: Good walking shoes are highly recommended. Long hair should be pulled back and logn necklaces or dangling jewelry should be worn cautiously.
- **SAFETY IS PRIORITY NUMBER ONE.** Should an incident occur, no matter how minor, the volunteer **MUST IMMEDIATELY REPORT IT TO A STAFF MEMBER.**
- Smoking is prohibited in the NHS building.
- Prior authorization is required before bringing in family members or friends during volunteer shifts.
- Resignation: In the event you are no longer able or willing to volunteer, please notify a staff member to ensure continuity of service to the animals.

NORTHWOODS HUMANE SOCIETY WAIVER OF LIABILITY

In consideration of NHS accepting my application for participation in NHS programs, I agree to release and hold harmless NHS from and against any and all loss, damage, claims, liability, costs, and expenses, of any nature whatsoever, including without limitation attorney's fees and disbursements arising from or occasioned by my participation in NHS programs. I understand if an accident or injury should occur, no matter how minor, that I will report the incident and seek any necessary medical attention utilizing my own medical insurance. I understand that there are certain risks inherent in handling animals and I accept those risks.

I agree that NHS may photograph my participation in any program and I hereby release any such photographs to NHS for use in its programs, publications and purposes.

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Signature

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Date