

Humane Society of the Ohio Valley -- Volunteer Application

volunteer coordinator Marsha Houston -- marshahouston@hughes.net

coordinator use
casual
animal care
transport
trades
stewards SMART

| | |
|------------|-----------------------|
| name | emergency contact |
| address | |
| city | state |
| | zip |
| email addy | ADULT'S date of birth |
| | home tel. |
| | cell |

Multiple children do not need to complete separate forms.
One waiver signature covers all children accompanied by you.

What tasks do you enjoy? Will you serve on a committee?

| | | | |
|---------------------|---|-------------------------------------|--|
| accounting | spay/neuter comm. | education | |
| computer work | membership comm. | | |
| fundraising | animal rescue comm. | | |
| journalism | volunteer comm. | experience paragraph | |
| organization | building grounds comm. | | |
| animal grooming | shelter operations comm. | | |
| dog walking | humane education comm. | | |
| kennel cleaning | When are you available to work? | | |
| litter box cleaning | avail morning | employment paragraph | |
| painting | avail afternoon | | |
| driving van | avail evening | | |
| grant writing | avail weekends | | |
| committee chair | avail weekdays | | |
| creativity | avail special events | | |
| marketing | Are you able to provide temporary foster care for shelter animals? | | |
| adoptathons | DOG foster <input type="checkbox"/> | CAT foster <input type="checkbox"/> | |
| chauffeuring | | | |
| maintenance | | | |

Have you been convicted of a misdemeanor or felony in the last 7 years? If yes, please explain details.

criminal history

waiver signature Y N

ADULTS -- Please read and sign the waiver below:

In consideration of HSOV accepting my application for participation in HSOV programs, I agree to release and hold harmless HSOV 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 HSOV's programs. I understand there are certain risks inherent in handling animals and I accept those risks. I understand if an accident or injury should occur, no matter how minor, that I will complete a Volunteer Injury Report form and seek any necessary medical attention utilizing my own medical insurance. I agree that HSOV may photograph my participation in this program, and I hereby release any such photographs to HSOV for use in its programs, publications and purposes.

Signature: _____

PLUS

ADULTS WITH MINOR CHILDREN participating -- Please read and sign the waiver below:

I agree to the above waiver of liability PLUS agree to the following: I give permission for my child to participate in the volunteer program at the HSOV. I release and hold harmless the HSOV, its agents, and employees, from responsibility or liability arising out of my child's participation. I understand there are certain risks inherent in dealing with animals. I certify that my child is covered under my health insurance policy should injury take place while volunteering or participating and I will be responsible for his/her medical bills. I agree to the above parental consent statement.

Adult w.children signature: _____