



200 Lee's Bridge Rd  
Delta, Alabama 36258

## Job Application

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

**Name:** \_\_\_\_\_

**Address** \_\_\_\_\_  
\_\_\_\_\_

**Home phone:** \_\_\_\_\_ **Cell phone:** \_\_\_\_\_

**Email address:** \_\_\_\_\_

**Emergency contact: Name** \_\_\_\_\_

**Relationship** \_\_\_\_\_

**Phone numbers: Home** \_\_\_\_\_ **Cell** \_\_\_\_\_

**Physical limitations** \_\_\_\_\_  
\_\_\_\_\_

**Reason you would like to work here** \_\_\_\_\_  
\_\_\_\_\_

**Education, diplomas, degrees, or certificates** \_\_\_\_\_  
\_\_\_\_\_

**Work Experience:**

Employer \_\_\_\_\_ address \_\_\_\_\_

Phone number \_\_\_\_\_ email address \_\_\_\_\_

Job duties \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Employer \_\_\_\_\_ address \_\_\_\_\_

Phone number \_\_\_\_\_ email address \_\_\_\_\_

Job duties \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Employer \_\_\_\_\_ address \_\_\_\_\_

Phone number \_\_\_\_\_ email address \_\_\_\_\_

Job duties \_\_\_\_\_

Reason for leaving \_\_\_\_\_

**References:**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Phone numbers: Home \_\_\_\_\_ Cell \_\_\_\_\_

Email address \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Phone numbers: Home \_\_\_\_\_ Cell \_\_\_\_\_

Email address \_\_\_\_\_

Please return completed application to : [Claycountyanimalshelter@gmail.com](mailto:Claycountyanimalshelter@gmail.com)

or mail to:

Clay County Animal Shelter

PO Box 194

Lineville, AL 36266



## LIABILITY WAIVER

I, the individual named herein below, acknowledge, and understand that working with animals may be dangerous and can lead to serious injury or even death. Furthermore, I understand and agree to personally assume any and all liability and risks of volunteering at the CLAY COUNTY ANIMAL SHELTER, INC. (hereinafter referred to as the "Shelter" or "CCAS").

In consideration of the Shelter's agreement to allow me to participate in its volunteer program at the Shelter, I agree to INDEMNIFY AND HOLD HARMLESS CCAS, its officials, agents, representatives, employees, officers, and representatives from every penalty, cause of action, claim, loss, cost, damage, reasonable attorney's fees, lien and/or expense arising out of or resulting from my performance of volunteer work at the Shelter, volunteer work performed off-site for the Shelter, or for any failure of observance of any rules, regulations or policies of the Shelter or CCAS. CCAS shall not be liable for damages to me arising from any act of any third party or animal. I further agree to INDEMNIFY AND SAVE HARMLESS CCAS from and against all claims of whatever nature arising from any of my future negligent acts, omissions or negligence, or arising from any accident, injury, or damage whatsoever caused to any person, animal or to the property of any person occurring while I am providing volunteer work to CCAS, or arising from any accident, injury, or damage occurring on CCAS's premises; provided, however, I acknowledge that I shall not be responsible for the negligence of CCAS.

I understand and agree that as a volunteer, I am not an employee of CCAS, and I am not entitled to any compensation or benefits of any kind, except as otherwise required by law.

By signing below, I hereby agree that I will not object to or challenge the protocols and procedures outlined by CCAS or its designate of CCAS.

This includes but is not limited to: not entering unauthorized areas, not touching animals that are in unauthorized areas due to the risk of transmitting contagious disease to other animals, not bringing cameras on the premises unless directly asked to by staff, not representing yourself as an employee of the Shelter and not leaving any doors unlocked at any time. Violation of any of these guidelines is grounds for immediate removal from the premises and termination of all future volunteer opportunities with CCAS.

Printed Name: \_\_\_\_\_ Age \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

License ID # \_\_\_\_\_ State \_\_\_\_\_

Parent/ Guardian Printed Name (if applicable) \_\_\_\_\_

Signature \_\_\_\_\_

**Photo Release** During my volunteer time with Clay County Animal Shelter, Inc., I understand my photo may be taken at various events and projects. By signing below I also hereby grant Clay County Animal Shelter, Inc. permission to use my likeness in photograph(s) and/or video(s) in any and all of its publications or on the World Wide Web, whether now known or hereafter existing. I will make no monetary or other claim against CCAS for the use of the photograph(s) and/or video(s).

Signature \_\_\_\_\_

Printed Name: \_\_\_\_\_