



200 Lee's Bridge Rd  
Delta, Alabama 36258

## Volunteer Application

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

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

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

**Date of birth** \_\_\_\_\_

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

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

**Emergency contact:**

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

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

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

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

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

# My Volunteer Interests

Check all that apply

Walking Dogs                       Playing with Cats                       Feeding Cats

Bathing and brushing dogs                       Feeding Dogs

Cleaning Kennels                       Working with rescues

Involvement with fundraisers                       Yard Maintenance

Clerical / Office work                       Housekeeping

## References

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

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

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

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

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

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

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

Print Name \_\_\_\_\_

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: \_\_\_\_\_

## **For Youth Volunteers**

Because we value your children, we want to ensure their safety while they are volunteering at the shelter. We welcome parents or guardians who want to work with their children during their volunteer time to help build a parent-child relationship. Youth volunteers must be 16 years of age, or older, to volunteer at the shelter without a parent or guardian present, but with their written permission. Younger children may volunteer if accompanied by a parent or a guardian.

### **Permission Slip and Liability Waiver**

I, \_\_\_\_\_, the parent / guardian of \_\_\_\_\_, do hereby give permission for my child to volunteer at the Clay County Animal Shelter. I understand that my child will be working with and around animals and may be asked to do physical labor, such as sweeping, mopping, cleaning, and may be walking dogs and handling cats, kittens and puppies.

I hereby knowingly and freely and voluntarily waive any right or cause of action of any kind whatsoever arising as a result of such activity from which, and liability may or could occur against the Clay County Animal Shelter, Inc. or its agents or employees jointly or individually.

**Signature of Parent / Guardian** \_\_\_\_\_

**Print Name of Parent / Guardian** \_\_\_\_\_

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