

| Date: | | | | |
|---|-----------------|-------------|------------------------|------------------|
| Name: | | E-mail: _ | | |
| Street Address: | | _ City: | State | Zip: |
| Cell Phone: | Home Phone: | | Work Phone: | |
| | <u>Informat</u> | ion Abo | ut You | |
| Are you 18 years of age or olde | er: Yes | No: | If no, how old are | you? |
| NOTE: If under the age of 18 y Children under the age of 16 n have a completed application all adults. | nust be accom | panied by a | n adult at the shelter | at all times who |
| Are you currently employed? | | | | |
| Yes No Employer: _ | | Occup | ation: | |
| Are you currently in school? | | | | |
| Yes No School: | | Grade l | evel Completed: | _ |
| Emergency Contact's Name: _ | | | | |
| Emergency Contact's Phone: _ | | | | |
| Please list one adult reference | (no family me | embers): | | |
| Name: | Relati | onship: | | |
| Phone: | | | | |
| Do you have any animals at h | ome? Ye | es No | | |
| If ves, how many and what ki | nd: | | | |

| , please describe and c | explain any special ac | commodations you may | · ileeu: |
|--------------------------------|---------------------------------------|--------------------------|--------------|
| | | | |
| lease list any previous | volunteer work: | | |
| Name of Agency and Location | To/From (dates) | Contact Person's Name | Phone number |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Vhy do you want to vol | lunteer at our shelter? | • | |
| | · · · · · · · · · · · · · · · · · · · | | |

Availability

Remember that we are only open Monday-Friday, 8:00 am – 5:00 pm. Please indicate what days of the week and what hours you are available:

| Mon | Tues | Wed | Thurs | Fri |
|---------------|--|----------------------|----------------------|---------------------------|
| | | <u>Volunteer O</u> | oportunities | |
| Adoption Fo | airs/Outside Events | . | Event | Planning/Fundraising _ |
| Cat Enrichm | ient | | Maint | tenance/Handyman |
| Dog Enrichn | nent | | Laune | dry/Dishes |
| *Dog Walking: | | Grounds/Gardening | | |
| Shelter Clea | ning (Dog, ca | t, or shelter) | | |
| * Minimum (| age is 18. Everyone | e must go through t | training. | |
| - | e any experience/ t is a volunteer? | training in any of t | he following areas a | nd are willing to utilize |
| Animal Reso | :ue/Transport | | Bathing/ | Grooming |
| Dog Training | g: | | Photogra | phy/Videographer: |
| | | | | |

If you have any questions about this application, please reach put to us at wardanimalshelter@cityofward.com.

Ward Animal Shelter has the right to refuse any application that has limitations that may result in a safety issue to themselves or the animals.

Thank you so much for your interest in helping Ward Animal Shelter!

WAIVER OF CLAIMS

Acknowledging that working with animals can be inherently dangerous and may cause situations where an incident could occur causing injury, harm, damage and even death, the undersigned hereby acknowledges for and on behalf of the undersigned's benefit and all of the undersigned's successors and assigns, agents, representatives, attorneys, financial consultants, predecessors, spouses, heirs, principals, estates, beneficiaries, executors, administrators and all those acting by and through them (hereafter referred to as "Releasee"), does hereby release and forever discharge the Ward Animal Shelter, an extension of the City of Ward and all of its officers, directors, estates, beneficiaries, agents, spouses, heirs, principals, representatives, administrators, executors, attorneys, financial consultants, predecessors, successors, assigns all of those acting for and on behalf (hereinafter referred to as "Releasor"), from any and all causes of action or claims, of whatever kind of nature, by reason of any matter, including by way of example only and not as a limitation any and all claims of whatever kind of nature, actual or imagined, asserted or which may be asserted by Releasee against Releasor arising out of being at the premises of the Releasor, representing Releasor at any offsite function on behalf of the Releasor and in furtherance of Release working at, with or in connection with Releasor, for whatever cause, manner or purpose including but not limited to the care, handling, feeding, bathing, or caring for the shelter animals. The Releasee hereby acknowledges that he/she is at least 18 years of age. In the event the Releasee is under the age of 18, the signature of the parent or guardian of the Releasee shall be set forth below and such signature shall bind the Releasee and said parent or guardian to this Waiver of Claims. The Releasee hereby acknowledges that the signature of their parent or guardian is the true and actual signature thereof and the Releasee understands the terms of this Waiver and signs it of his/her free will that Releasee intends to be bound by the terms and conditions set forth in this Waiver of Claims. The Releasee hereby fully read and understands this Waiver of Claims, agrees to be bound by the conditions and terms set forth herein, and agrees that in the event there is a violation of any of the foregoing, Releasor may take whatever action it deems necessary to enforce this Waiver, and Releasee agrees to pay for any and all costs, of whatever kind of nature, including reasonable attorney's fees and costs, incurred by Releasor in connection with the enforcement of this Waiver of Claims or any of the terms contained therein. This Waiver of Claims contains the entire agreement between the parties herein and the terms of this Waiver of Claims are contractual and not a mere recital.

| Volunteer Signature: | | - | |
|-------------------------------------|-------------|---|--|
| Volunteer Printed Name: | | _ | |
| Signature of Parent or Guardian: | | | |
| Printed Name of Parent or Guardian: | | | |
| Cell phone: | Home phone: | | |

Dated:

VOLUNTEER AGREEMENT

I hereby accept the volunteer role at Ward Animal Shelter for no monetary compensation. I understand that working in the shelter or with Ward Animal Shelter animals may expose me to certain risks inherent in animal caretaking and I voluntarily accept those risks. While at Ward Animal Shelter, I agree to conduct myself at all times in a manner which minimizes any risk to me or to the animals. If I bring in a minor child or children with me to the shelter or into the presence of any of the shelter animals, I do so with the knowledge that exposure of such minor(s) to the dangers that may accompany our service to Ward Animal Shelter will be at my own risk and that of the minor(s). I will supervise this minor child (or children) at all times in the shelter or elsewhere in the presence of shelter animals. If I am pregnant or suffer any physical problems that may be affected in any way by cleaning or other chemicals used in connection with my volunteering that may be detrimental to my health or the health of my fetus, I will temporarily cease any activity of my volunteer position that may be detrimental. I understand that the shelter supervisor has full operation control of the shelter volunteers and has the authority to take whatever action that is necessary in the case of a violation at the shelter of Ward Animal Shelter policy or procedure. In the event I have a complaint or criticism about any facet of my volunteering or about Ward Animal Shelter policy or procedure, I agree to deliver such complaint or criticism in confidence, if necessary, to the shelter supervisor, Police Chief Steve Benton, or Mayor Charles Gastineau.

Signature of Volunteer:

| Printed Name of Volunteer: | | Date: |
|---|---|---|
| Home#: | | |
| | PHOTO WAIVER | |
| or all publications, including press are understand that these publications were turned. I authorize the above men publicizing and promoting Ward Ani | nd website entries, without p will become the property of N ntioned to edit, copy, exhibit mal Shelter and all functions | es in a photograph and/or video in any payment or any other considerations. I Ward Animal Shelter and will not be and publish the photos for purposes of held under that name. In addition, I related to the use of the photograph. |
| Volunteer Signature: | Volunteer Pri | nted Name: |
| | | ardian of |
| I have read and understand the above photographed as described above. | ve description of this docume | ent. I consent to my child being |
| Parent Signature: | | |