

ARNPRIOR & DISTRICT HUMANE SOCIETY
VOLUNTEER APPLICATION FORM

Name: _____

Address: _____

Phone: _____

E-mail: _____

TO BE ELIGIBLE TO VOLUNTEER YOU MUST BE 16 YEARS OF AGE OR OLDER. TO VOLUNTEER AS A DOG WALKER, YOU MUST BE 18 YEARS OF AGE OR OLDER.

Are you volunteering because you are required to volunteer for a certain number of hours? If yes, please indicate number of hours required.

Why are you interested in volunteering?

For what activities are you interested in volunteering? Check all that apply.

Shelter Volunteer – cleaning and cat cuddling

Shelter Volunteer – dog walker

Bake Sale donations Bake Sale volunteer (assist with setup and pricing)

Yard Sale morning setup Yard Sale afternoon clean up

Walk-a-thon – checkpoint, registration table, etc

Gardening Yard work

Other events (Dog show, Pet store adopt-a-thons, Microchip Clinic etc)

Please list any experience that you have related to caring for, or working with animals.

Do you have any health concerns (allergies, for example) that might affect your ability to work in the shelter? If yes, please explain.

Do you have any pets at home? If so, please list. NOTE: All volunteers with the Arnprior & District Humane Society, who are also pet owners, are strongly advised to ensure that their own animals' vaccines are current.

Are you a member of any other animal related organization? Please describe.

When are you available to begin volunteering?

Please indicate which days you are available to volunteer.

Please indicate how frequently you would like to volunteer.

Are you currently an ADHS member? If not, please consider joining us! Membership Forms can be found on our website at www.arnpriorhumanesociety.ca or at the Arnprior & District Humane Society.

EMERGENCY INFORMATION:

Supply the name of a person to contact in the event of an emergency.

Name:

Relationship:

Address:

Phone:

The following information would be helpful in the event of a bite, scratch, or injury sustained while you are working at the shelter.

Family Doctor:

Phone :

Date of Birth:

Allergies to Medication:

Pre-existing Medical Condition:

If you have any concerns regarding this application, please contact:

Stephanie Cantrell, Shelter Manager

613 623-0916

district.sPCA@bellnet.ca

DATE:

SIGNATURE:

*****ALL VOLUNTEERS MUST READ AND SIGN ATTACHED WAIVER FORM, IF VOLUNTEER IS UNDER 18 YEARS OF AGE, A PARENT MUST ALSO SIGN FORM.**



ARNPRIOR & DISTRICT HUMANE SOCIETY

VOLUNTEER CONSENT FORM & WAIVER

Welcome!!! We deeply appreciate your love of animals and your desire to help them through volunteering at the shelter or providing foster care for shelter animals.

1. Please **respect spaces marked "Staff Only"** by not entering them. If you require something that you do not readily find available in open spaces, staff will gladly assist you.
2. **Confirm with staff before feeding any of the animals** anything that is not clearly marked for their consumptions. Some have reactive digestive systems or special dietary needs.
3. Our dogs come to us from various backgrounds. Some have been loved and trained; many have been abused or neglected and may remain frightened or aggressive. Some get along well with other dogs; some do not. Occasionally we have dogs with us that have not as yet been vaccinated and/or spayed or neutered and must be kept separate from other dogs to avoid the possibility of spreading disease, of increased aggression, or of mating if an unaltered male and female interact. (We love puppies, but we don't want to breed them!) **For your safety and that of the animals, we need you to agree that you will check with staff before allowing any 2 or more dogs to occupy the same space** (i.e. in walks together, in the yard, in a large kennel, etc.) and that you will abide by staff's decisions and recommendations in this regard.
4. Likewise exercise due caution, follow staff instructions in interacting with the cats and remember **to use the hand sanitizer** whenever you move from one room to the other to avoid the possible spread of disease or infection
5. In the unlikely event that a volunteer neglects to consult with staff about interacting with the animals or chooses to act against staff's recommendations and instructions, and injuries occur, the shelter reserves the right to hold the volunteer responsible for associated costs.
6. I acknowledge that all services I provide are strictly on a volunteer basis, without any remuneration and without liability of any nature on behalf of the Arnprior & District Humane Society. I acknowledge that all services are provided at my own risk. I recognize that in handling animals and performing duties as a volunteer or foster home, there exists some risk of injury. On behalf of myself, my heirs, personal representatives, and executors, I hereby release, discharge, indemnify, and do not hold accountable, the Arnprior & District Humane Society, its officers, employees or agents from any and all liability including claims, causes of action, or demands of any nature or kind, costs and fees, based on losses, damages or injuries which may be incurred or sustained by me during volunteer work and all the consequences thereof. I acknowledge that I have read this policy statement and waiver in its entirety and agree to the terms set out above.

Name: _____

Signature: _____

Date: _____

If Under 18 Signature of Parent or Guardian: _____

Staff Signature: _____

We value your input. If you have ideas about ways to improve our shelter, shelter processes, or your volunteer experience, please share them with the Shelter Manager or with any member of the Board of Directors.