

Volunteer Application

The Humane Society of Wayne County (HSWC) is a 501(c)(3) charitable organization funded primarily through memberships, bequests, memorials, public donations from individuals and businesses, and fundraising events. The mission of the HSWC Animal Shelter is to provide a humane facility to shelter, feed, and care for lost, unwanted, or abused domestic animals of Wayne County, New York, and to provide a facility for humane education to the citizens of Wayne County. The Society welcomes the participation of those willing to volunteer at the Shelter or to represent our Society at special events or community public relations programs in accordance with our mission and philosophies.

Please complete this application and return it to the **Humane Society of Wayne County**, 1475 County House Road, Lyons, NY 14489. Thank you.

You must be at least 15 years old before you can walk dogs, work with the cats, or have any contact with any of the animals. We apologize for this, but policy/insurance regulations require our strict adherence to this policy.

Please CHECK the appropriate box that indicates your age

Are you: Under 15? 15-17? 18 or older?

If you are under 15 years of age, there are other opportunities for you such as Special Events, *Wish List* procurement, etc. Please call the Shelter for more specific information.

Volunteers less than 18 years of age must have parental/guardianship permission and be accompanied by a parent/guardian while at the shelter (see reverse side).

What are you interested in doing? Please check all that apply.

- Most Valued Hands:** Clean cages, feed and water animals, wash dishes, clean kitchen area, mop floors.
- Bath Time:** Groom and bathe animals; particular animals can truly benefit from this.
- Walkin' Around:** Staff will help you select a dog to walk around the Humane Society grounds.
- Right Hand Person:** Help with typing, clerical duties, filing, and data entry.
- You, Your Work, and the Humane Society:** Publicize adoptable animals within your company or school. Collect items from our *Wish List* from within your organization.
- Group Activities:** Landscape projects, painting, clean-up, collect items from our *Wish List*. Hold a fund raising event to help our animals.
- Foster Friends:** When the event arises, caring for an animal in your home until it is suitable for adoption. Be sure to read "*10 Ways to Become a Successful Foster Parent*" provided by the Humane Society of the United States.

(over)

What days and what hours would you be able to do volunteer work? _____

Please PRINT the following information:

Name: _____

Address: _____ Town: _____ State: _____ Zip: _____

Home Phone #: _____ Work Phone #: _____

HSWC strongly recommends all volunteers at the shelter have a current tetanus vaccination.

Please read the following carefully and acknowledge your understanding by signing and dating below.

I understand that many of the animals at the Shelter do not have current vaccinations and responsible behavior on my part will minimize possible exposure to contagious diseases. I will immediately report any accident or any injury to a person or animal to a member of the shelter staff.

I realize that the HSWC Shelter staff must occasionally make difficult choices about euthanizing animals. The shelter cannot release aggressive animals to the public, nor can it release animals that are not likely to recover from sickness or injury. Although the shelter staff try to avoid euthanizing because of lack of space to house additional incoming animals, occasionally this is necessary. To help prevent this, I will encourage spaying and neutering to fight overpopulation.

I, (please PRINT name) _____ hereby agree that I am providing volunteer services to the Humane Society of Wayne County. I understand that the Humane Society of Wayne County is not responsible for any illness or injury caused by any animals that I come into contact with during my volunteer work. I agree to hold harmless and release from liability the Humane Society of Wayne County should I become sick or injured from any animals as a result of my volunteer work.

I confirm that the information provided on this application is correct. I agree to make every effort to perform my assigned tasks.

Volunteer's Signature: _____ Date: _____

As a parent/guardian, I have carefully read and understand the above and agree that my son/daughter volunteers at his/her own risk. I hereby grant permission for him/her to volunteer at the HSWC Shelter and agree to accompany him/her at all times.

Parent's/Guardian's Signature: _____ Date: _____

In case of an emergency, please provide a contact name and phone number:

Contact Name: _____ Phone #: () _____
Alternate Phone #: () _____