

Volunteer Application - Adult



PLEASE PRINT CLEARLY

Today's Date: _____

Volunteer's Name: _____ Over 18? **Yes / No**

Street Address: _____

City: _____ State: _____ Zip Code: _____

E-Mail Address: _____

Cell Phone number: _____ Home Phone: _____

Do you have any allergies or medical conditions Stray Haven should be aware of in case of an emergency? **Yes / No** If yes, please explain: _____

Employment information: (please circle) Employed Retired Student Other

Employer's name/School: _____

Job Title/Grade Level: _____

EMERGENCY CONTACT:

Name: _____

Cell Phone: _____ Home: _____ Work: _____

Relationship: _____

Volunteering information and Areas of Interest:

How did you hear about volunteering? **Please circle:** Friend / Family / Social Media / Staff / Other

Have you volunteered for Stray Haven before? **Yes / No** If yes, When? _____

Do you volunteer for any other Animal Shelter/Organization? **Yes / No**

If yes, Where? _____

Why are you interested in volunteering at Stray Haven? _____

Do you have any pets? **Yes / No** How many? _____

Are they up to date on shots? **Yes / No**

What types and number of pets? _____

Do you have experience handling or working with animals? **Yes / No**

Please Explain: _____

Please check all areas you are interested in volunteering:

- | | | | |
|--------------------------|--------------------------|--------------------------|------------------------------------|
| <input type="checkbox"/> | Cat Care | <input type="checkbox"/> | Grounds (gardening/mowing/plowing) |
| <input type="checkbox"/> | Dog Walking | <input type="checkbox"/> | Handy(wo)man Facility Help |
| <input type="checkbox"/> | Foster Home | <input type="checkbox"/> | Photography |
| <input type="checkbox"/> | Offsite Adoptions/Events | <input type="checkbox"/> | Office assistance |
| <input type="checkbox"/> | Fundraising | <input type="checkbox"/> | Humane Education |
| <input type="checkbox"/> | Spay/Neuter Clinics | | |

Are you willing to commit on a regular basis? **Yes / No** Available Days: _____

Are you available on short notice? **Yes / No**

Special interest/ Hobbies/ Other Volunteer work: _____

Please list any special skills or experience you may have: _____

Do you prefer to work in a group or by yourself/independently? _____

Are you willing to attend a training session? **Yes / No**

When are you available to start? _____

Bite/Scratch/Infection/Injury Waiver

I, _____, understand the chances of being bitten and/or scratched by ANY of the animals at the shelter. I am willing to accept that risk and agree that I will not hold Stray Haven and/or its associates responsible should I receive any injuries. Furthermore, I also understand the chance of contracting infection from the animals (i.e. ringworm, mange), and am willing to accept that risk as well, while not holding Stray Haven and/or its associates responsible. Should I be injured in any way due to my participation at Stray Haven, I will not hold Stray Haven and/or its associates responsible in any case.

Confidentiality/ Conflict of Interest Policy for Volunteers:

Volunteers are responsible for maintaining confidentiality of all proprietary or privileged information to which they are exposed while serving as volunteers, whether this information involves staff members, volunteers, clients, donors, animals or the public. Failure to maintain confidentiality may result in termination or other corrective action. All volunteers will be required to sign the Confidentiality/Conflict of Interest Agreement as a condition of volunteering.

Confidential information includes but is not limited to: animal, client or donor information from our computer system, whether gained through the course of volunteer service or from other internal sources, shelter photographs, all records, files, forms, applications, mailing lists, passwords, security codes, correspondence, messages or any other entities belonging to Stray Haven and/or bearing Stray Haven's logo or name. Such information is the sole property of Stray Haven and may not be disseminated, used, published or sold without the written consent of the Executive Director or Shelter Manager.

Volunteers are not permitted to represent themselves as working on behalf of Stray Haven to the public, media, social media or to any other organization without authorization from the Executive Director or Shelter Manager.

Volunteers are prohibited from engaging in any activity religious or political while acting as a representative of Stray Haven. This activity can jeopardize the shelter's ability to continue to obtain donations and its status as an Internal Revenue Code 501(c)(3) charitable organization.

Volunteers will not use their association with the shelter to promote activities related to the volunteers outside personal or professional interests, including, but not limited to soliciting business, fundraising or other personal causes.

If a volunteer is at odds with the shelter's philosophy, policies, procedures or past, proposed or existing state of affairs, the volunteer will only discuss such differences with the Volunteer Coordinator or the Executive Director. Volunteers must not discuss shelter problems/issues with those, including, but not limited to, nonsupervisory staff, other volunteers, clients, family or friends, or the public, as this undermines internal morale and external perception of the shelter. When presented through proper channels, Stray Haven will take the appropriate steps to help resolve the issue. Any violations of this policy may result in immediate dismissal and further action.

I have read and understand the above Bite/Scratch Waiver and Confidentiality/Conflict of Interest Policies and agree to volunteer and abide by all policies and procedures.

Volunteer Printed Name: _____

Signature: _____ Date: _____

Witness/Stray Haven Staff Printed Name: _____

Signature: _____ Date: _____

As a Volunteer with Stray Haven, I agree to the following:

- To represent Stray Haven in a professional manner while volunteering.
- To respect Stray Haven’s right to terminate me as a volunteer, should it be determined that I am in conflict with the goals of Stray Haven. Stray Haven has the right to also terminate volunteers if it’s determined a volunteer may be a threat to any animal’s health and well-being.
- To use equipment and facilities belonging, or being used by Stray Haven, in a manner not to damage or destroy them. Volunteers are responsible for replacing and/or repairing any property they intentionally damage or destroy.
- To report any abusive behavior in the shelter to the Shelter Manager or Executive Director.
- To not abuse or neglect any animals in the care of Stray Haven or otherwise.
- To not cause bodily harm to any other volunteers or staff members.
- Alcohol and illegal drugs are not permitted to be used at any time when you are volunteering at Stray Haven. If a volunteer violates either or enters the facility while under the influence of previously ingested substances, they will be dismissed as a volunteer.
- Smoking is not permitted while handling animals for the protection of the animals and other Stray Haven volunteers and staff.
- For your protection and the safety of our animals, no sandals or flip flops, short skirts or shorts, high heels, tank or tube tops are to be worn during volunteer hours.
- To direct any media outlets who want to speak with me to the Board President, Executive Director or Shelter Manager.
- To render service to all people without regard to race, creed, color, national origin, culture, language, sex, sexual orientation, religion, age, veteran status, mental or physical disability – Stray Haven does not tolerate discrimination of any form

I have read the above-mentioned conditions and agree to abide by them while a volunteer at Stray Haven.

I understand and agree that submitting this application does not automatically register me as a volunteer for Stray Haven, and that there are certain qualifications I must meet, including attending an orientation and acceptance of established volunteer policies and procedures before I may begin volunteering.

By submitting this form, I attest that the information I have provided is true and accurate.

Print name: _____

Signature: _____ Date: _____

Received By:	Date:
Approved: Yes / No	Initial: