



Friends Forever Humane Society
966 Rudy Road, Freeport, IL 61032 | 815-232-6164

VOLUNTEER APPLICATION

Name _____ Date _____

Address _____ City _____

State _____ Zip _____ Home Phone _____

Cell Phone _____ E-mail address _____

Signature of volunteer (or guardian if under 18) _____

How many hours are you able to donate each month? _____

Availability	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
Morning							
Afternoon							
Evening							

Areas of Interest

Cat Care		Fundraising	
	Clean cages		Chili Day (serve, clean up, tickets)
	Grooming		Bake for events
	Socialization		Rummage sales (sorting, check out)
			Run booth at stores, fairs, etc.
Dog Care			Other as needed
	Clean kennels	Educational / therapy programs	
	Grooming		Visit area nursing homes with animals
	Train / socialization		Visit area schools with animals
	Walk dogs		
Dog Park		Administration	
	Mow lawn		Mailings – labeling, folding, sorting
	Trim weeds		Writing of newsletter articles
	Other yard maintenance		Writing of thank you notes
			Office computer work
Buildings & Grounds		Other	
	Carpentry		Animal fostering
	Electrical		Take home laundry (animal blankets)
	Plumbing		Wearing cat or dog costume at events
	Other maintenance		

Additional interests, talents, or comments: _____



Volunteer Waiver of Liability, Medical Release, Indemnity and Confidentiality Agreement
Friends Forever Humane Society

I hereby agree that if I am accepted as a volunteer worker for the Friends Forever Humane Society ("FFHS"), I agree to comply with all the rules and regulations that may be established from time to time by FFHS. I understand that failure to comply with the rules and regulations of FFHS may result in my immediate termination as a volunteer.

I understand and agree that if accepted as a volunteer, all services performed by me will be performed on a strictly volunteer basis, and that I will receive no pay or compensation of any kind; that I will not be an employee of FFHS nor otherwise derive any benefits normally available to employees of FFHS.

I acknowledge that in handling animals and performing other volunteer tasks, there exists a risk of injury, including physical harm or death, and that all services performed by me will be done at my own risk. Moreover, I understand that there are inherent risks associated with my volunteer activities, including the risk of personal injury resulting from animal bites and other animal behavior.

Therefore, on behalf of myself, my heirs and personal representatives, I hereby release, discharge, indemnify and hold harmless FFHS and its assigns, successors, agents, staff, officers, board of directors, employees, contractors and representatives from any and all claims, causes of action or demands of any nature of cause whatsoever, including costs and attorney fees, arising out of or relating to my volunteering with FFHS, including, but not limited to, animal bites, accidents or injuries.

Furthermore, I understand that it is important to have a tetanus vaccination before joining the Volunteer Program team, and thus, I understand that it is important to discuss being vaccinated against tetanus with my physician. I, therefore, release FFHS from all injuries, claims, or other loss that I may incur because of my failure to pursue this matter further and receiving a proper tetanus vaccination.

I understand that public relations are an important part of volunteering with FFHS. On behalf of heirs, my personal representatives and myself, if accepted as a volunteer, I give FFHS permission to use and publish photographs taken of me as a volunteer for use in its public relations effort.

The nature of the dealings of FFHS with the public makes it essential that we treat each pet transaction and adoption as a confidence. We expect your absolute adherence to the following:

Employees, Volunteers or Members of the Board of Directors shall not allow any unauthorized individuals access to the records, financial statements, files or any other property belonging to FFHS. Authorization for the release of such information must come in writing from the President of the Board of Directors.

Employees, Volunteers or Members of the Board of Directors shall not under any circumstances divulge any information to any unauthorized person concerning a pet, applicant, or adoptive individual or family. Any calls, requests or inquiries of this nature shall be referred to an officer of FFHS. The names or personal information regarding applicants or adopters will not be discussed *outside* the shelter with anyone.

All business and personal matters involving the personnel of FFHS shall be treated in the strictest confidence for a period of up to two years after termination and/or resignation.

I have carefully read the above Waiver of Liability, Medical Release, Indemnity and Confidentiality Agreement and fully understand the contents thereof. I am aware that this is a release of liability and a contract between myself and the Friends Forever Humane Society, and I sign it of my own free will.

Name (please print) _____

Signature _____ **Date** _____

Or guardian signature if volunteer is under 18 years of age

FFHS Signature _____ **Date** _____