## **Orientation:**

## **AVHS Volunteer Application**



## **PLEASE PRINT**

| Name  |  | DOB//Age  |
|---|--|---|
| Address   |  | Home Phone  |
| City  | Zip  |   |
| Email Address:  | Parent's Email if under 18   |   |
| T-shirt Size: □YL □AS □A  | AM 🗆 AL 🗆 AXL 🗆 A2XL 🗀 A3)   | (L  |
| We like to keep our voluntee  | Parent's Email if under 18   |   |
| <b>About You</b><br>Have you volunteered elsew  | rhere? □Yes □No Describe you   | r duties:   |
|   | •  | •   |
| How did you hear about our  Emergency Contact Info  Should anything happen to information regarding who   | r program? □School □Friend<br>you while you are at the shelter<br>we should contact.   | □FaceBook □Website □Job □Flyer □Voluntee or other volunteer locations, we need  |
| Name  |  | Home Phone  |
| Relationship  |  | Cell Phone  |
| qualifications I must meet includi I agree to complete an orientation I agree to wear a name tag while I will give 24-hours notice if I am u I understand that my participation for certain risks, some of which mothers around me, harm, includin participant in Volunteer Services of for my services or time spent volu Valley Humane Society, as well as theft, demands, liabilities, causes Humane Society. I grant and convectordings of me or my likeness of Signature | ng the acceptance of established volunt training. I agree to dedicate 4-6 hour I am at AVHS locations and agree to purable to fulfill my shift. In and/or involvement as a volunteer of ay not be reasonably foreseeable. I furg, but not limited to, bodily injury, darfor the Auburn Valley Humane Society Inteering. By signing this agreement, I all the organization's employees, ager of action, or expenses, known or unknivey to AVHS all right, title and interests | nteer policies and procedures. s per month for a minimum of six months. urchase a volunteer t-shirt for \$10.  If Auburn Valley Humane Society carries with it the potentication ther acknowledge that these risks could cause me, or mage to property, emotional distress, or death. I am a willing and understand I will receive no monetary compensation agree to release, indemnify, and hold harmless Auburn hats, representatives, successors, etc. from all losses, claims, own, arising out of my volunteering for the Auburn Valley in any and all photographs, images, videos, or audio y providing volunteer services to AVHS. |
| Parent or Guardian<br>Signature (if under 18)   |  | Date  |