



Volunteer Application

Name: _____ Date: _____

Permanent Address: _____

City/State/Zip Code: _____

Mailing Address (if different): _____

City/State/Zip Code: _____

Email: _____

Phone Number(s): _____

Emergency Contact: _____

Emergency Number: _____

Special Skills/Training: _____

Select Interests:

____ Front Desk ____ Kennel Attendant ____ Grooming

____ Photography ____ Office

____ General Work

Volunteer Time:

____ Once ____ Short Term ____ On-Going Hrs per week: ____

Prefer:

____ Mon ____ Tues ____ Wed ____ Thurs ____ Fri ____ Sat ____ Sun

Hours available:

Statement of Agreement

Please read each statement, initial on each line, and indicate your full agreement by signing below.

____ I agree not to consume, use, possess or be under the influence of any drug or alcohol products while volunteering for RCHS.

____ I understand that any conduct or pattern of conduct that would tend to disrupt, diminish or otherwise jeopardize public trust in Robeson County will result in dismissal.

____ I understand that my volunteer assignment with RCHS may be terminated at any time.

____ I have **NOT** been convicted and/or placed on probation for any animal related offense

Signature/Date: _____

Printed Full Name: _____

RCHS Witness: _____

Volunteer Release Form

I, _____, volunteer my services to the Robeson County Humane Society, hereinafter called RCHS. I acknowledge that I am not an employee of RCHS; thus, as a non-compensated volunteer, I am not subject to Worker's Compensation. I understand that all labors performed by me are undertaken voluntarily by me knowing the inherent risk and knowing that there may be hidden, unseen and unforeseeable risks arising out of my activities for RCHS which may cause me harm. I acknowledge that working with animals can be hazardous; nevertheless, I knowingly, understandingly, and voluntarily assume, personally or by guardian, the risk for any accidents, losses, injuries or any other type of damages to person or property or pain and suffering which I may encounter while performing volunteer activities for RCHS or while visiting RCHS Friends for Life Shelter.

In volunteering for RCHS functions, work or any other services performed by me, I hereby waive any and all claims, compensatory or punitive, and release and hold harmless RCHS, the city of Lumberton, and any sponsoring organizations or businesses from any and all liability or responsibility for accidents, injuries or losses incurred at any such facility or in traveling to and from a volunteer function or in any activity at any place or time which I am in the course and scope of my volunteer services with RCHS and any other agency named above.

Release Signature: _____

Date: _____

RCHS Witness: _____

Parent Signature/Date: _____