



HUMANE SOCIETY OF TRUCKEE-TAHOE

P.O. Box 9041 🐾 Truckee, California 96162 🐾 (530) 587-0667 (phone & fax)

VOLUNTEER APPLICATION

Name: _____

Birth Date (include year of birth only if you are under 18 years of age): _____

Mailing Address: _____

Street Address: _____

City/State/Zip: _____

Home Phone: _____ Work: _____ Cell: _____

E-mail Address: _____

Current Occupation: _____

Reference: (Name) _____ (Phone) _____

Other Volunteer Experience (Name of Organization/s & Dates Worked): _____

Pets Owned/Animal Related Experience: _____

Other related special skills, knowledge, abilities, interests:

I can commit to volunteer: Hours _____
 Once a week
 Once a month
 Schedule permitting

I am interested in the following volunteer opportunities:

- | | | |
|--|---|---|
| <input type="checkbox"/> Cat Socialization | <input type="checkbox"/> Poster Distributor | <input type="checkbox"/> Humane Education |
| <input type="checkbox"/> Dog Walking | <input type="checkbox"/> Customer Service | <input type="checkbox"/> Pet Assisted Therapy |
| <input type="checkbox"/> Fundraisers | <input type="checkbox"/> Foster Care | <input type="checkbox"/> Computer/Clerical |
| <input type="checkbox"/> Special Events | <input type="checkbox"/> Board Volunteer | <input type="checkbox"/> Adoption Counseling |

Other (describe) _____

How did you hear about our volunteer program? _____

If volunteering through referral from another agency (school, court, etc.), please indicate the agency, contact person, and number of hours required to volunteer: _____

APPLICANT’S AGREEMENT

In signing this application, I understand and agree to the following:

- I agree to abide by **the policies and procedures** presented to me during the course of my volunteer activities. I understand that I am responsible for **reviewing all the materials** given to me at orientations and trainings.
- I understand that the goal of volunteering is to engage and educate the public on the mission & philosophy of the Humane Society of Truckee Tahoe (HSTT), and my actions should always further this goal. I understand that I can and should always seek guidance if I am ever unclear about the mission, philosophy or practices of HSTT.
- I authorize the Humane Society of Truckee-Tahoe (HSTT) to seek **emergency medical treatment** in case of accident, injury, or illness.
- I understand that HSTT welcomes & relies upon **volunteer feedback**. If I am ever in disagreement with any philosophy, policy or practice of HSTT, I agree to use the appropriate, **established communication channels** to share my concerns or feedback in order to eliminate miscommunication or redundant efforts. The channels are, in order:
 - 1) Communicate first with either the Animal Programs Manager, or the Volunteer Coordinator, as appropriate.
 - 2) If you feel your concern was not addressed at this level, you should then communicate it directly to the Executive Director.
 - 3) Finally, if your concern remains unaddressed, you should bring it to the HSTT Board of Directors.
- I know that as an HSTT volunteer, I represent the Humane Society, and I promise not to engage in any activity - whether physical, verbal or written - that may **cause harm to the reputation** of HSTT. I agree to be a **role model** for the humane treatment of animals, at home as well as while working with the shelter animals.
- I understand that HSTT records or discussion regarding previous and new pet owners are to be kept **confidential**.
- I understand that if I am **injured** while acting as an unpaid member of the volunteer staff that I am not covered by California state workers' compensation law.
- HSTT has my permission to use any and all **photographs** taken of me to promote Society services and programs or to publicize any event. I understand that all prints, negatives, and graphics files become the sole property of HSTT and may be used without payment or prior notification.
- I agree to **accept supervision** and support from the HSTT staff and understand that they will provide me with feedback to insure my safety or to help me perform my volunteer duties most effectively.
- **Animal Program Volunteers only:** I agree to complete my volunteer commitment of a minimum of 4 hours per month for 6 months or other commitment specified here: _____
- I understand that failing to observe the above agreements along with the policies and procedures of the Humane Society of Truckee-Tahoe could result in my dismissal from the volunteer program.

Date _____ Signature _____

PARENTAL CONSENT (Required for volunteers under 18 years of age)	
I, _____, the parent/legal guardian of _____, consent to his/her participation as a volunteer with the Humane Society of Truckee-Tahoe. We acknowledge that the activities that he/she will participate in may include, but are not limited to, the handling of animals. We, on behalf of ourselves and the volunteer, take responsibility for and expressly assume any and all risks associated with the volunteer’s participation in Humane Society activities and further agree to indemnify the Humane Society of Truckee-Tahoe and hold it harmless for and from any losses it may incur as a result of his/her participation.	
_____	_____
DATE	SIGNATURE OF PARENT (OR LEGAL GUARDIAN)