

Adult Volunteer Application (16 years and older)



Thank you for your interest in volunteering with the Klamath Animal Shelter!

**** A background check will be done on all applicants and a \$10 donation will be requested to pay for your background check. Thank you for helping.**

The Klamath Animal Shelter is a local non-profit organization that has been caring for homeless animals since 1969. We are an open-door animal shelter and no animal in need is turned away. Volunteers enrich the lives of the homeless pets and the people they help.

Date: _____ First Name: _____ Last Name: _____

Mailing Address: _____

City, State, and Zip Code: _____

Home Phone: _____ Cell: _____ Work Phone: _____

E-mail (required / we keep in touch through e-mail) _____

Preferred Contact: phone e-mail either

By my signature, I affirm, accept and understand that submitting this application and other documents does not guarantee acceptance into the Klamath Animal Shelter Volunteer Program. I fully affirm, accept and understand that the Klamath Animal Shelter, also known as the Klamath Humane Society, Inc., has the right, at their sole discretion, to decline any application or terminate any volunteer from the program at any time without cause or explanation and I reserve the right to do the same.

Signature: _____

**Klamath Animal Shelter (KAS), Klamath Humane Society, Inc. (KHS)
Volunteer Waiver and Release Agreement**

This agreement is entered into with the Klamath Animal Shelter ("KAS") also known as the Klamath Humane Society, Inc. ("KHS"), jointly by the undersigned "Volunteer" in order to permit the Volunteer to participate in the Volunteer program at KAS / KHS. This agreement is for the benefit of KAS / KHS and each of its staff members, employees, officers, directors, agents, and representatives (known individually as a "Released Party" and collectively as "Released Parties").

I affirm that I have been advised that the activity of working with the shelter animals is hazardous and involves contact with animals that are unpredictable. As such, KAS / KHS cannot be held liable for injuries or accidents that may occur as a result of working with these animals.

I am aware that injuries, loss of or damage to personal property, or death may occur as a result of my participation on KAS / KHS property or with off-site volunteer activities such as, Adoption Outreach, Foster Care, Special Events, etc.

I agree KAS / KHS and the Released Parties shall not be held responsible or liable for any personal injury, other injury, death, damage, loss, or expense, either to myself or my personal property, whether or not such injury, death, damage, loss, or expense is caused by the negligence of KAS / KHS, any Released Party or any other person. It is my intention to exempt and hold harmless KAS / KHS and all Released Parties from any and all liability related in any way to my participation as a Volunteer.

Should an accident or other medical emergency occur while I am participating in the Volunteer program at the KAS / KHS facilities, while en route to or from a KAS / KHS sponsored event, or at an off-site event, and KAS / KHS staff members are unable to reach my Emergency Contact in a timely manner, for medical authorizations, then Volunteer hereby gives consent for KAS / KHS staff members to authorize necessary medical transport, hospitalization and medical treatment, including but not limited to, injections, anesthesia, surgery and medication.

Furthermore, I agree to assume full responsibility for any and all billings and debts incurred as a result of medical treatment or services performed to treat injuries or illnesses resulting from my participation as a KAS / KHS Volunteer.

I understand and agree that if any provision of this Agreement is found to be unenforceable in any way, it shall be enforced to the maximum extent possible and all other provisions of this Agreement shall remain in full force and effect.

I represent and warrant that I have the authority to enter into this agreement. I hereby acknowledge that I have read, understand and agree to all of the guidelines and Volunteer Waivers and Agreements contained in this document and I verify that I am able to perform the functions of each position that I am interested in:

Print your name: _____ **Phone numbers:** _____

Address: _____

Signature: _____ **Date:** _____

**Klamath Animal Shelter (KAS), Klamath Humane Society, Inc. (KHS)
Volunteer Waiver and Release Agreement (continued)**

This agreement is entered into with the Klamath Animal Shelter ("KAS") also known as the Klamath Humane Society, Inc. ("KHS"), jointly by the undersigned "Volunteer" in order to permit the Volunteer to participate in the Volunteer program at KAS / KHS. This agreement is for the benefit of KAS / KHS and each of its staff members, employees, officers, directors, agents, and representatives (known individually as a "Released Party" and collectively as "Released Parties").

I understand that, if my volunteer application is accepted, I will be serving KAS / KHS in a volunteer capacity and I have no expectation of payment or compensation for my service.

I will treat all animals, people and property that I come in contact with at the KAS / KHS with respect.

I will refrain from using profanity and will conduct myself with courtesy at all times.

I agree to have a positive attitude and I will refrain from engaging in negativity or gossip of any kind and to always perform my duties in the best interest of the pets and of KAS / KHS.

I agree to commit to volunteering a minimum of eight (8) hours per month for the first three (3) months, and then will strive to volunteer at least 6 hours per month thereafter.

I will be on time for my scheduled shift. I will sign in and sign out for my shift using the designated process and will report any additional time I spend for offsite KAS / KHS related activities via e-mail or phone in a timely manner. I understand that accurate tracking of my volunteer hours directly aids in the Klamath Animal Shelter's ability to obtain grant funding.

I will wear KAS identification at all times while volunteering. I will not use the KAS identification for non Klamath Animal Shelter activities. I will arrive ready to volunteer and appropriately dressed as assigned for the duty I have agreed to perform. If I am no longer able to volunteer at KAS, I will return my identification and any other KAS items immediately.

I will wear a Klamath Animal shelter volunteer identification badge at all times while volunteering. I will not use the identification for non Klamath Animal Shelter activities.

I will arrive ready to volunteer appropriately dressed, including wearing close-toed shoes, long pants or clothing appropriate for my assignment. I understand that shorts or open-toed shoes pose a safety risk and that for most activities, are not appropriate dress and are not allowed.

I understand that each volunteer is a representative of the Klamath Animal Shelter in the eyes of the public. I agree to wear appropriate clothing to cover any tattoos that, at the sole discretion of KAS / KHS, are deemed to be offensive. For safety purposes, I will refrain from wearing or will cover visible body piercing(s), excluding traditional ear piercing.

I understand that safe volunteering at KAS / KHS requires use of all senses and that many situations and circumstances will arise that require my full and undivided attention. I understand that multitasking while volunteering may expose the animals, myself or others to unforeseen dangers and therefore reduces everyone's safety. I agree to refrain from distracting activities such as talking on cell phones, texting, using earphones or ear buds, etc. while working with animals or the general public. In addition, I will not arrive to perform volunteer activities under the influence of alcohol or illegal substances. Furthermore, I will not arrive to perform volunteer activities under the influence of any prescription drug(s) that may affect my ability to properly perform my volunteer activities.

Signature: _____ **Date:** _____

**Klamath Animal Shelter (KAS), Klamath Humane Society, Inc. (KHS)
Volunteer Waiver and Release Agreement (continued)**

I understand that my first point of contact at KAS / KHS is the Volunteer Coordinator or a designated staff member, in the absence of the Volunteer Coordinator. If I feel that a communication problem or conflict exists between a member of the paid staff and me, I will report the problem immediately to the Volunteer Coordinator.

I understand that KAS / KHS is a discrimination Free Workplace and I will not discriminate, harass or retaliate against any member of the KAS / KHS staff. If I experience or observe perceived or real discrimination, harassment or retaliation, I will report it immediately to the Volunteer Manager, the Shelter Manager, or the Director of KAS.

I give the Klamath Animal Shelter (KAS / KHS) the right and permission to use my name, likeness and voice, together with my endorsement or testimonial (whether written or oral), in all types of advertising and promotion. This right and permission includes photographs, video recordings, audio recordings and all other media in which my name, likeness or voice may be reproduced.

I understand and agree that all records, forms, applications, mail lists, passwords, security codes, correspondence, messages or any other entities belonging to the Klamath Animal Shelter and/or bearing their logo and/or name, are the sole property of KAS and may not be disseminated, used/published/sold without the written consent of the Executive Director of KAS / KHS.

I understand that as a volunteer, I may gain access to information about KAS / KHS, its clients, donors and/or staff members which are confidential in nature. I agree to maintain confidentiality and I will never disclose any information including, but not limited to information about KAS / KHS, clients, donors and/or staff members.

I understand that volunteering at KAS / KHS is a privilege and that my volunteer status at KAS / KHS may be discontinued at any time, without cause or explanation at the sole discretion of Klamath Animal Shelter ("KAS") also known as Klamath Humane Society, Inc. ("KHS") . I reserve the right to terminate my volunteer position at any time without cause or explanation..

I understand and agree that if any provision of this Agreement is found to be unenforceable in any way, it shall be enforced to the maximum extent possible and all other provisions of this Agreement shall remain in full force and effect.

I represent and warrant that I have the authority to enter into this agreement.

I hereby acknowledge that I have read, understand and agree to all of the guidelines and Volunteer Waivers and Agreements contained in this document.

Signature: _____ **Date:** _____

Thank you for your interest in volunteering at the Klamath Animal Shelter!

YOUR NAME: _____ **DATE:** _____

Cell Phone: _____ **Home Phone:** _____

Address: _____

Emergency Contact Information: This information will only be used if an emergency arises.

First and Last Name: _____ **Relationship:** _____

Home Phone: _____ **Cell:** _____ **Work:** _____

First and Last Name: _____ **Relationship:** _____

Home Phone: _____ **Cell:** _____ **Work:** _____

Info and Area (s) of Interest:

Have you ever worked for or volunteered at an animal shelter? No Yes If yes, where and in what capacity?

Animal Experience: _____

Customer Service Experience _____

Prior Volunteer Experience: _____

Current Volunteer Opportunities: Please check all that you are interested in!

- | | |
|--|---|
| <input type="checkbox"/> Cats – Care and socialization | <input type="checkbox"/> Pet transport to and from local veterinarians and/or various rescue groups – see note below |
| <input type="checkbox"/> Dogs – Care, socialization, walking, training, brushing, bathing, etc. | <input type="checkbox"/> Pet Photography |
| <input type="checkbox"/> Customer service and kennel tours | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Freedom Dog Park Grounds Maintenance | |

PET TRANSPORT NOTE: Every day pets are transported to and from veterinary offices between 8am and 2pm. Animal transport to other shelters and rescue groups are occasionally needed. A valid license, clean driving record and proof of insurance is required for pet transport. Thank you again for your interest in helping the pets!

Please note days and times that you are available and specify how far you are willing to transport pets or any other special requirements you would have for transportation. Use back of form if needed.
