



VOLUNTEER APPLICATION

Thank you for volunteering your time to help the animals. The animals need you!

Because of insurance, if you are under the age of 14 you need to have a parent/guardian with you at all times while you are at the shelter. If you are under the age of 18, you will need a parent/guardian

signature before volunteering. You are welcome to volunteer whenever we are open – there is no need to sign up for a schedule – just come in and be sure to sign in and out on the volunteer log.

Please be sure to fill out the back portion of this application.

Name: _____ Sign-In Name: _____
if different from previous

Primary Phone: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Emergency Contact Person: _____ Relationship to You: _____

Emergency Contact Phone: _____

If you are volunteering through a program (school, court-ordered, etc.), please indicate the following:

Organization: _____ Name of Contact: _____

Phone: _____ Number of hours you are required to work: _____

Do you have any allergies or physical conditions that we should be aware of? Yes No

If yes, please explain: _____

An e-mail must be provided to take part in the options below:

Would you like to be added to our e-newsletter? Yes No

The following questions are centered on the planning of fundraising events throughout the year. Please only circle yes if you plan on being available to help for our fundraisers.

Would you like to be included in out-of-shelter events as a volunteer? Yes No
(Setting up and breaking down BRHS fundraising events such as Paws for Wine, Soggy Doggy, Dog Fest, etc.)

Would you like to be part of our fundraising committee? Yes No
(Assist in the planning of BRHS fundraising events)

OFFICE USE: ON ROSTER <input type="checkbox"/>

Release, Waiver and Assumption of Risk:

I hereby agree that if I am accepted as a volunteer worker for the Brookings Regional Humane Society, ("BRHS") I agree to comply with all of the volunteer policies and procedures which may be established from time to time by BRHS. I understand that failure to comply with the volunteer policies and procedures of BRHS may result in the immediate termination of my volunteer assignments and privileges.

I understand and agree that if accepted as a volunteer, all services performed by me will be performed on a strictly voluntary basis, and that I will receive no remuneration, pay or compensation of any kind, that I will not be an employee of BRHS nor otherwise derive any benefits normally available to employees of BRHS, and that BRHS shall incur no liability of any nature as a result of my volunteering for BRHS.

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

In signing this waiver, I acknowledge that I understand its intent, and I, for myself and my family or participating group, do hereby agree and will absolve and hold harmless THE BROOKINGS REGIONAL HUMANE SOCIETY, INC. from and against any blame and liability for any injury, harm, loss, inconvenience or any damage of any kind whatsoever, which may result from or be connected in any way to my participation in any and all events.

I hereby agree to follow all of the guidelines and regulations required for these events, to prevent injuries, damages or mishaps involving any volunteer, animal or Brookings Regional Humane Society representative participating in the event.

I certify that I have read this waiver and understood its significance.

****If under 18 parent or guardian must sign****

Printed Name: _____

Signature: _____ Date: _____

Volunteer's Age: _____ years

*Printed name of Parent/Guardian: _____

*Signature of Parent/Guardian: _____ Date: _____