



VOLUNTEER APPLICATION

P.O. Box 49776, 235 Wilbanks Circle
Greenwood, SC 29649
(864) 942-8775 (Adoption Center)
volunteer@gwdhumanesociety.org
www.gwdhumanesociety.org

Contact Information:

Date: ___/___/___

Last Name: _____ First Name: _____

Street Address: _____

City, State, Zip: _____ Main Phone Number: _____

Email: _____

Employer: _____ Title Position: _____

May we contact you at work? Yes / No Work Phone: _____

Date of Birth: (mm/dd/yyyy) ___/___/___

In Case of Emergency:

Name: _____

Relationship: _____ Phone: _____

Do you have any physical, pre-existing medical or psychological limitation, including allergies, that might hinder you from participating in any area of our facility? (for example, heart condition, back injury, allergies, etc.) Yes / No

If yes, please explain: _____

Tell Us About Your Decision to Volunteer:

How did you learn about the Humane Society of Greenwood?

We all enjoy helping animals. What is your special reasoning for volunteering with us?

(Note: If you are completing court ordered community service, please see staff for the Community Service Application)

Tell us about other volunteer experiences you've had.

Tell us about any special skills that you have. (dog training, grooming, computer skills, data entry, foreign languages, etc.)

Do you have experience working with animals? Yes / No - Please describe.

Have you had any formal education &/or experience in animal care or welfare?

Yes / No -Please Describe

Times Available to Work:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Areas of Interest:

- Administrative Tasks
- Adoption Event
- Adoption Events Management
- Bathing & Grooming
- Buildings/grounds
- Cat Socializing
- Data entry
- Distributing flyers
- Dog Training
- Dog Walking/Socializing
- Fostering
- Fundraising Events
- Grant writing
- Humane Education Programs
- Kennel Cleaning
- Laundry
- Marketing
- On-Call assistance during inclement weather or emergency
- Pet Detective Team
- Pet transporting-rescues, events, etc.
- PetSmart Cattery Care & Cleaning
- Photography
- Rescue Buddy
- Supply Pick Up-Local &/or long distance
- TNR Clinic Assistance
- Trap-Neuter-Return Program
- Trash drop-off

References:

Name	Relationship	Telephone

Date of Orientation Attended: ___/___/_____

As a volunteer for the Humane Society of Greenwood (HSOG), I understand & agree to the following:

- Volunteers shall abide by the safety rules, regulations, policies & procedures of the HSOG.
- Volunteers shall work at HSOG at their own risk.
- Volunteers hereby indemnify & hold harmless HSOG for any damage, injury, illness or casualty resulting from their work on the premises of HSOG or in related work concerning HSOG.
- Volunteers shall not behave in a manner which causes harm or stress to the animals. Any reckless action will result in the volunteer immediately being escorted off of the premises.
- HSOG shall not be liable in any manner or form for the negligence or lawful acts of the volunteers.
- I give HSOG permission to use photographs or video footage of my activities while participating as a volunteer.
- I understand that as a volunteer I may gain access to information about HSOG, customers or staff that is confidential. I agree to maintain confidentiality & refuse to disclose any information that is either private or personal, during the term of my volunteering & extending afterwards.

All of the information I provided in the application is true & correct. If any of the information changes, I will advise you promptly. If any information is false, I forfeit the right to be accepted as a volunteer with the Humane Society of Greenwood.

Volunteer Signature

Date

Parent or Guardian Signature (if volunteer is under 16)

Date

HSOG Representative

Date

STATE OF SOUTH CAROLINA)
)
COUNTY OF GREENWOOD)

RELEASE OF ALL CLAIMS

KNOW ALL MEN BY THESE PRESENTS, that I, _____, do hereby remise, release, acquit, & forever discharge **Greenwood County**, its respective heirs, agents, apparent agents, servants, employees, former employees, council members, & their heirs, successors & assigns, & all other persons, firms, governmental entities, & insurers, whether herein named or referred to or not, & who, together with the above named, may be liable to me, _____, of & from any & all claims, whether in tort &/or contract, demands, debts, rights, actions, causes of action, damages, costs, loss of service, & expenses & compensation of whatsoever nature, now existing or which may hereafter accrue, arising from or related to the volunteer work at the Greenwood County Animal Shelter.

This full & final Release shall cover & include, & does cover & include, any & all future damages not now known to any of the parties hereto, but which may later develop or be discovered, including the effects & consequences thereof, & including all causes of action therefor as against **Greenwood County**.

I, _____, further declare & represent that no promise, inducement, or agreement not herein expressed has been made to me, that this Release contains the entire agreement between the parties thereto, & that the terms of this Release are contractual & not a mere recital.

IN WITNESS WHEREOF, my hand & seal are hereunto set this _____ day of _____, 2017, in the presence of the witnesses named below.

I HAVE READ THE FOREGOING RELEASE OF ALL CLAIMS.

SIGNATURE: _____

SIGNATURE OF PARENT OR GAURDIAN IF UNDER 16: _____

WITNESSES:
