



VOLUNTEER APPLICATION

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

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: _____

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?

What other animal organizations have you been associated with?

Tell us about other volunteer experience you've had.

Tell us about any special skills that you have. (Foreign languages, dog training, computer skills, etc.)

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

Education:

Highest level of school completed: _____

Are you currently enrolled? Yes / No

Areas of study or degree? _____

Times Available to Work:

Areas of Interest:

-
- Grooming, socializing cats
- Grooming, walking, or socializing dogs
- Cleaning animal living/playing areas
- Cleaning offices, kitchen, public areas
- Laundry
- Training new volunteers
- Technical support (Website design, computer experience, etc.)
- Assist with telephone duties (Follow ups, networking, telephone trees, etc.)
- Assist with newsletters, writing, and production
- Distributing flyers, etc.
- Fundraising
- Grant writing
- Event management
- Booth set up for events
- Event staffing
- Photography
- Working with children, teens, and students
- Public presentation/education
- Facility maintenance/repair
- Gardening/grounds maintenance
- Pet transporting- events, rescues, etc.
- Food and supplies transportation
- Sewing and craft making
- Recruitment of volunteers, financial supporters, board members
- Trash drop-off
- Mentor for volunteers
- Petsmart events
- Data entry

Current Pets:

Do you have pets at home? Yes / No If so, what kind? _____

Are they Vaccinated? Yes / No Are they spayed or neutered? Yes / No

Do you have any physical, medical or psychological limitations that might hinder you from participating in any area of our Volunteer Program? Yes / No

If yes, please explain: _____

References:

Name

Address

Telephone

Date of Orientation Attended: ___/___/_____

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

Volunteers shall abide by the safety rules, regulations, policies and procedures of the HSOG.

Volunteers shall work at HSOG at their own risk.

Volunteers hereby indemnify and 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.

All of the information I provided in the application is true and 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 14)

Date

HSOG Representative

Date