

VOLUNTEER APPLICATION

P.O. Box 49776, 235 Wilbanks Circle Greenwood, SC 29649 (864) 223-2498 (Adoption Center) volunteer@gwdhumanesociety.org www.gwdhumanesociety.org

Contact Information:		Date://
Last Name:	First Name:	
Street Address:		
City, State, Zip:		
Email:		
Employer:	Title Position:	
May we contact you at work? Yes	s / No Work Phone:	
Date of Birth: (mm/dd/yyyy)/	//	
Are you on Facebook? Yes / No (If	so, feel free to ask to join our	HSOG Volunteers page)
	go through orientation. You MA	with the animals MUST fill out an AY NOT bring your friends, family, etc. o so, you will be asked to sign out and
NOTICE: No volunteers are allowed specifically asked to help with some	**	• , ,
In Case of Emergency:		
Name:		
Relationship:		
Do you have any physical, pre-exist might hinder you from participating injury, allergies, etc.) Yes / No		

If yes, please explain:

Tell Us About Your Decision to How did you learn about the Hu		
· · · · · · ·	/hat is your special reasoning for volu	-
Tell us about other volunteer ex	xperiences you've had.	
Tell us about any special skills to foreign languages, etc.)	hat you have. (dog training, grooming	, computer skills, data entry,
	g with animals? Yes / No – Please de	
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 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 Fundraising Events

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) DELEASI	F OF ALL CLAIMS
COUNTY OF GREENWOOD) RELEASI	E OF ALL CLAIMS
KNOW ALL MEN BY THESE PRE	ESENTS, that I,	, do hereby remise, release,
acquit, & forever discharge Greenwood	County, its respective h	eirs, agents, apparent agents, servants, employees,
former employees, council members, & t	heir heirs, successors &	assigns, & all other persons, firms, governmental
entities, & insurers, whether herein named	l or referred to or not, &	who, together with the above named, may be liable
to me,, of	& from any & all clain	ns, 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 accru	ue, arising from or relate	d to the volunteer work at the Greenwood County
Animal Shelter.		
This full & final Release shall cover	r & include, & does cov	ver & include, any & all future damages not now
known to any of the parties hereto, be	ut which may later dev	relop or be discovered, including the effects &
consequences thereof, & including all caus	es of action therefor as ag	gainst Greenwood County.
I,, fu	rther declare & represen	at that no promise, inducement, or agreement not
herein expressed has been made to me, the	at this Release contains t	he entire agreement between the parties thereto, &
that the terms of this Release are contractua	al & not a mere recital.	
IN WITNESS WHEREOF, my ha	and & seal are hereunto	set this,
2018, in the presence of the witnesses name	ed below.	
I HAVE READ THE FOREGOING F	RELEASE OF ALL CLA	IMS.
	SIGNATURE	B:
SIGNATURE OF PARENT OR GA	.URDIAN IF UNDER 16	:
WITNESSES:		
