



## VOLUNTEER APPLICATION

P.O. Box 49776, 235 Wilbanks Circle  
Greenwood, SC 29649  
(864) 942-8775 (Adoption Center)  
[volunteer@gwdhumanesociety.org](mailto:volunteer@gwdhumanesociety.org)  
[www.gwdhumanesociety.org](http://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?

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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)

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Tell us about other volunteer experiences you've had.

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

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

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Have you had any formal education &/or experience in animal care or welfare?  
Yes / No -Please Describe

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**Times Available to Work:**

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

**Areas of Interest:**

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

**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 \_\_\_\_\_, 2016, 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:

\_\_\_\_\_

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