

# HCSPCA Volunteer Information Form

## My Personal Contact Information

<b>My Name:</b>		Street Address:	
Cell Phone:		City:	
Work Phone:		State:	
Email:		Zip Code:	
		Date of Birth:	
Best Way To Contact:	>	Today's Date:	

## My Emergency Contact Information

In case of an emergency, the HCSPCA will act immediately to contact your preferences below:			
<b>Primary Contact:</b>		Relationship:	>
Phone Number:		Other Phone No.:	

**Please note:** Volunteers who work directly with shelter pets will be exposed to dog and cat dander; dog and cat hair; cleaning chemicals; pet foods with preservatives; bouncy animal activity; and other potential hazards. Some lifting and labor may occasionally be asked of volunteers.

## My Volunteer Interests

Circle all that apply.		
Walking dogs Cat cuddling Kennel Clean Front Desk Yard Work Animal Transport Resale Store	Baking for fundraisers Clerical/office work Housekeeping Adoption screening and follow-up Laundry Grooming/Bath Fundraising	Public relations Photography Fostering Animals Dog training Off-site adoptions Public education Special Events

## For Youth Volunteers Only

*Because we value your children we want to ensure their safety while they are volunteering at Hill Country SPCA. We welcome parents or guardians who want to work with their child during their volunteer time to help build a parent-child relationship. Youth volunteers must be 15 years of age or older to volunteer at the shelter without a parent or guardian present, but with their written permission. Younger children can volunteer if accompanied by a parent or guardian.*

**Permission Slip and Liability Waiver.** [ \_\_\_\_\_ ], the parent of [ \_\_\_\_\_ ], do hereby give permission for my minor child to volunteer at the Hill Country SPCA. I understand that my child will be working with and around animals and may be asked to do physical labor such as sweeping, mopping, cleaning, and will be walking dogs and handling cats and kittens and puppies. I hereby knowingly, freely, and voluntarily waive any right or cause of action of any kind whatsoever arising as a result of such activity from which, and liability may or could accrue, against the Hill Country SPCA or its agents or employees jointly or individually.

Parent's Signature:

Date:

Parent's Name Printed:]



## Hill Country SPCA Volunteer Agreement

This agreement is notification of your acceptance of an appointment to a volunteer position with the Hill Country SPCA. It is understood that this appointment is not for wages or other forms of compensation but strictly a volunteer of time for the betterment of the Hill Country SPCA.

### **Outline of Duties**

### **Reimbursement of Expenses**

Volunteers are eligible for reimbursement of reasonable expenses incurred while undertaking business for the HCSPCA. The Executive Director shall distribute information to all volunteers regarding specific reimbursable items. Prior approval must be sought for any expenditure.

### **Insurance**

Liability and accident insurance is not provided for volunteers engaged in HCSPCA business. Volunteers are encouraged to consult with their own insurance agents regarding the extension of their personal insurance to include volunteer work.

### **Confidentiality**

Volunteers have a responsibility for maintaining the confidentiality of all proprietary or privileged information to which exposed while serving as a volunteer, whether this information involves a single staff, volunteer, animal, or other person or involves overall HCSPCA business. Failure to maintain confidentiality may result in termination as a volunteer with the HCSPCA and/or prosecution.

### **Acknowledgement**

I acknowledge that I have read and understood this agreement and agree to the terms outlined. Furthermore, I acknowledge receipt of a copy of this agreement, with the original becoming a part of my volunteer file.

By: [Printed Name of HCSPCA Volunteer]

Volunteer Signature: \_\_\_\_\_

Date: \_\_\_/\_\_\_/\_\_\_

Executive Director Signature: \_\_\_\_\_

Date: \_\_\_/\_\_\_/\_\_\_