



SHELBY COUNTY Humane Society

400 Hudson Blvd.
Shelbyville, KY 40065
Phone: (502)633-4033

Website: ShelbySociety.org
Email: Shelbysociety@hotmail.com

Volunteer Application & Agreement

Personal Information-

Name-_____

Address-_____

City/State/Zip-_____

Cell Phone-_____ Home Phone-_____

Email-_____

Age: ___ 18 or older ___ 15 to 17 ___ if under 15, what is your age? _____

Emergency Contact-

Name-_____ Relationship-_____

Primary Phone-_____ Secondary Phone-_____

Volunteer Profile-

Please describe any present or past volunteer work:

Organization-_____

Position-_____

What type of animal experience do you have?

Availability

Are you volunteering to fulfill court ordered community service requirements? ___ Yes ___ No

If yes, how many hours? _____ Date to be completed? _____

Circle the days you are able to volunteer

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

What hours are you available to volunteer?

Weekdays- _____

Weekends- _____

How many hours would you like to volunteer? Week: _____ Month: _____

Do you have any allergies or physical conditions that might affect your volunteer work? If so please describe-

Which species are you most comfortable working with and handling?

Cats _____ Dogs _____ Either _____

Please check any areas in which you would like to participate-

___ Cat Care

___ Dog Care

___ Housekeeping/Laundry

___ Grooming animals (bathing, brushing, etc.)

___ Leash training/walking

___ General socialization

___ Yard work/building maintenance

___ Clerical Work

___ Spay/Neuter Clinic (must be 18 years old) (typically Wednesdays)

___ Spay/Neuter Clinic Prep (typically Tuesdays)

___ Other: _____

Do you have any special skills, training, interests or hobbies you would like to share?



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Volunteer Agreement

I, _____ agree to the following terms and conditions intending to be legally bonding to them.

- I will abide by the mission, rules, regulations, policies and programs of Shelby County Humane Society (SCHS) while I am a volunteer.
- I will not engage in any unsafe, illegal, or unethical activities while acting as a SCHS volunteer.
- I understand that public relations is an important part of volunteering at The SCHS. I allow the SCHS to use any photographs, films, videotapes, or other visual representation taken of me in volunteer service for use in public relations efforts.
- I may come in contact with animals with unknown histories. I understand these animals may have undiagnosed diseases, conditions, and/or behavioral problems that are unknown to SCHS. I am willing to undertake the risks of working with animals of unknown history or temperament.
- I understand that ANY mistreatment, disrespect, or inappropriate behavior to any animal or person will result in immediate termination of my volunteer activities with SCHS.
- I recognize that while performing my services in a voluntary capacity in handling animals there may be a risk of injury. On behalf of myself, my heirs, and personal representatives I hereby release and hold harmless SCHS, its Board of Directors, agents, and employees from any and all claims, causes of action or demands of any nature or cause connected to my volunteer service.
- I also agree to release and hold SCHS harmless for any and all damages to my personal property while performing my volunteer services.

Signature- _____ Date- _____

Parent/Guardian Signature (if under 18) - _____