



Humane Society of Catawba County-Hickory  
 3224 20th Ave SE, Hickory, NC 28602  
 P.O. Box 63, Hickory, NC 28603  
 (828) 464-8878

Humane Society of Catawba County-Newton  
 201 Government Services Dr, Newton, NC 28658  
 (828) 466-7171

# VOLUNTEER APPLICATION

Name			Volunteer Age	Today's Date
Street Address		City	State	ZIP
Home Phone	E-mail Address		VIP Partner (if applicable)	
Employer/Occupation		Work Phone		

Circle below the types of volunteer jobs you would be interested in (*training is required and will be provided for many volunteer opportunities listed*)

- Dog Walking/Socialization (16+)
- Cat Cuddling/Socialization (16+)
- Pet Therapy (nursing home, 16+)
- Special Events (golf tournament, petco, mall, 16+)
- Foster Care (21+)
- Cleaning (dishes, laundry, kennels, dog bathing, 16+)

Days/Times volunteers are allowed to help.

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<b>Hickory</b>	10-12:00	11-6:00	11-6:00	11-6:00	11-6:00	11-6:00	11-6:00
<b>Newton</b>	10-12:00	11-6:00	11-6:00	11-6:00	11-6:00	11-6:00	10-3:00

\*You must be 16 years old to volunteer at the Newton shelter.

Do you have allergies to animals?				
Do you have any physical, medical or psychological limitations or disabilities?				
In case of emergency, notify:	Work Phone	Cell Phone	Home Phone	Relation to Applicant

I hereby agree to accept a position as a volunteer worker for the Humane Society of Catawba County, and in so doing, I agree to comply with all of the Humane Society of Catawba County's rules and policies and I understand that failure to do so may result in my immediate termination as a volunteer. \_\_\_\_\_ (*initials*)

Volunteer Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Adult/Guardian Signature (if under 18 yrs) \_\_\_\_\_

**Volunteer Orientation is required.**  
**Please email [hscvvolunteercoordinator@gmail.com](mailto:hscvvolunteercoordinator@gmail.com) to reserve a spot.**

<b>For Office Use Only</b>
Orientation Date _____
Training _____
Remarks _____

**Humane Society of Catawba County  
Waiver, Release, and Indemnification Agreement**

This agreement is entered into with Humane Society of Catawba County (HSCC) jointly by the undersigned \_\_\_\_\_ (print your name), in order to permit the Volunteer to participate in the Volunteer program. This Agreement is for the benefit of HSCC and each of its staff members, employees, officers, directors, agents, and representatives (known individually as an "Indemnitee" and collectively as "Indemnitees"). Volunteers have been advised that the activity of working with the shelter animals is hazardous and involves contact with animals that are unpredictable. As such, Humane Society of Catawba County cannot be held liable for injuries or accidents that may occur as a result of working with the animals. Volunteers understand that the following are some, but not all, of the risks associated with working with shelter animals:

*Bites or scratches from dogs, cats, rabbits, rodents, and birds, being knocked down or pulled excessively by a dog, injuries relating to wrist/hand/fingers from a dog leash, slips/trips/falls resulting from wet floors/kennels or equipment, hitting heads on objects such as cage doors/kennel walls/hose boxes, etc., water or cleaners sprayed in eyes, injuries resulting from cage doors, equipment, etc., flea/tick bites or ring worm infestation, internal or external parasites, zoonotic illnesses (human illness contracted from animals), animal illness exposure to animals at home, injuries related to lifting animals, food, litter, or equipment, injuries caused from grooming equipment-such as clipper blades, shears, driers, exposure to cleaners, latex gloves, bleach, parasite control products, exposure to or incidents relating to the public (outbursts, inappropriate contact), exposure to or incidents relating to the volunteers (outbursts, inappropriate contact), loss of personal property, any type of damage to car while parked on HSCC property, damage to clothing from animals, cages, chemicals, etc.*

Volunteers are aware that injuries, loss of or damage to personal property, and death may occur as a result of Volunteer's participation at the shelter. Volunteers agree that HSCC and Indemnitees shall not be held responsible or liable for any personal injury or other injury, including death, damage, loss, or expense to Volunteer or his/her property, whether or not such injury, death, damage, loss, or expense is caused by negligence of HSCC, any Indemnitee, or a third party. Volunteers and their heirs, executors, and administrators agree to hold harmless each Indemnitee against any and all manner of legal actions, such as suits, debts, claims, or liability of any kind incurred while the Volunteer participates at the shelter.

Volunteers fully, completely, and unconditionally waive and release each Indemnitee from all rights, liabilities, duties, claims, charges, demands, actions, damages, costs, attorney fees, or expenses of any kind that Volunteers may have now or in the future against HSCC or any Indemnitee relating to participation at the shelter. Volunteers represent and warrant that he/she is physically and mentally fit to safely work with animals and public at the shelter. Should an accident or other medical emergency occur while participating at the shelter or while Volunteer is en route to or from HSCC-sponsored events and HSCC staff members are unable to timely reach Emergency Contacts for medical authorizations, then Volunteer hereby gives consent for HSCC staff members to authorize necessary hospitalization and medical treatment, including but not limited to, injections, anesthesia, surgery, and medication.

Volunteer represents and warrants that Volunteer has current medical insurance coverage and agrees to be responsible for any and all billings and debts incurred with respect to such medical treatment or services. Volunteers represent and warrant that each of them has the authority to enter into this agreement. If any provision of this Agreement is found to be unenforceable in any way, it shall be enforced to the maximum extent possible and all other provisions of this Agreement shall remain in full force and effect.

Volunteer: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

Parent Signature if Volunteer is under 18:

\_\_\_\_\_  
(Signature)

Emergency contact/number: \_\_\_\_\_