

Outlook_____ CC_____ VSS_____ PVSA_____

VOLUNTEER APPLICATION

ANIMAL WELFARE LEAGUE OF CHARLOTTE COUNTY

3519 Drance St., Port Charlotte, FL 33980 (941) 625-6720

Web address: www.awlshelter.org

Email: volunteers@awlshelter.org

Bruce Klemish, Volunteer Coordinator, Patty Cook, Assistant Volunteer Coordinator

2018 Volunteer Orientation Schedule: January 13 & 27, February 10 & 24, March 10 & 24, April 14 & 28, May 12 & 26, June 9 & 23, July 14 & 28, August 11 & 25, September 8 & 22, October 13 & 27, November 10, December TBT. **All orientations are at 11:45 a.m. in the shelter's conference room.**

Date: / /	Are you 17 or older? Y/N	Are you a snowbird? Y/N
Full Name:		
Address:		
City, State, ZIP Code:		
Phone:	Alt. Phone	
Email Address (required for communication):		
Days available: Sunday, Monday, Tuesday, Wednesday, Thursday, Friday, Saturday		
Time available:		
Emergency contact name:		Phone

What would you like to help with?

Laundry	Pet Therapy	Cat Cuddling	Cat Room Cleaner
Dog Walker	Gardening	Sun Flea Market	Fundraising
Off-Site Events	Clerical	Disaster Evacuation	Other

Have you ever volunteered before? What was your experience like?

Welcome Email/Handbook_____ Off-Site Orientation _____



The Animal Welfare League
of Charlotte County, Florida, Inc.

Volunteer Agreement

My services to the Animal Welfare League are provided strictly in a voluntary capacity as a volunteer, and without any express or implied promise of salary, compensation or other payment of any kind whatsoever.

My services are furnished without any employment-type benefits, including employment insurance programs, worker's compensation accrual in any form, vacations or sick time.

I will familiarize myself and comply with the Animal welfare league's policies and procedures applicable to volunteers. In particular, I fully understand that the Animal welfare League expects high standards of moral and ethical treatment of the animals under its care. I will adhere to these standards in my capacity as a volunteer. I will follow the protocols and all safety precautions of the shelter. I will follow all the instructions of the staff of the Shelter. I understand that the Animal welfare league, without notice or hearing may terminate my services as a volunteer at any time, with or without reason.

I understand the potential safety risks of working with animals and of bring home illnesses from the Shelter to personal pets. I will practice reasonable health hygiene and adhere to the hygiene policies of the Shelter. I am covered by a health insurance plan, and I am current on my tetanus vaccination.

I will not bring unapproved guests or family to the Shelter while I am volunteering.

Release: I understand that the handling of animals and other volunteer activities on behalf of the Animal welfare League may place me in a hazardous situation and could result in injury to me or my personal property. on behalf of myself, and my heirs, personal representatives and assigns, I hereby release, discharge, indemnify and hold harmless the Animal Welfare League and its directors, officers, employees, and agents from any and all claim, causes of actions and demands of any nature, whether known or unknown, arising out of or in connection with my volunteer activities on behalf of the shelter. I hereby authorize the animal welfare league to use my photographs of me in its possession for public relations purposes. I ask that the Shelter use reasonable efforts to give me advance notice of any such use.

If you are under 17, we must have your parent or legal guardian's sign a form prior to volunteering.

I agree to these terms/conditions _____ I do not agree to these terms/conditions _____

Print Name _____

Signature _____ Date _____

Parent/Guardian _____ Date _____