

Volunteer Application and Contract

Humane Society of Iredell County
PO Box 1617
Statesville, NC 28687
704-663-3330
iredellhumane@yahoo.com



Name _____ Date of Birth _____
Address _____
City _____ Zip _____
Home Phone _____ Cell Phone _____
Email Address _____
Driver's License # _____
Employer/Occupation _____
Work Phone _____ May we call you there? _____
Does your employer make donations based on your volunteer hours?

In case of emergency, notify _____
Home Phone _____ Cell Phone _____ Work Phone _____
Relation to Applicant _____

Indicate the types of volunteer work you would be interested in. Training is provided.

- Adoption assistance at PetSmart in Mooresville (2nd, 4th, and 5th Saturdays)
- Foster care of dogs in your home
- Foster care of cats in your home
- Assist with Spay/Neuter transports (2nd Wed. and 4th Tue. in the morning)
- Pet Therapy
- Special adoption events
- Cat cage cleaner at PetSmart in Mooresville
- Phone Committee

How many pets do you have at home? _____ cats _____ dogs _____
Are they all spayed/neutered and up to date on vaccines? _____

Please list any qualifications you have that could be helpful to H.S.I.

Please list any constraints or restrictions that may affect your ability to volunteer

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

Waiver and Release: I release the Humane Society of Iredell County, and all of its employees, agents, and board members, from any liability of any nature, whether or not the basis of such liability is presently know to either party. It is understood by the parties to this agreement that I/we will not bring suit or any charges against the Humane Society of Iredell County, its employees, agents, board members, or pet owners. This agreement shall be binding on all parties, their heirs and assigns.

Volunteer Signature _____ Date _____

Adult/ Guardian Signature (if under 18 years) _____