



SECONDHAND MUTTS

Cage-Free & Friendly
Dog Adoption Center

Respect the dog.

VOLUNTEER APPLICATION

Thank you for applying for a volunteer position at Secondhand Mutts. A representative will contact you once your application has been reviewed to let you know about the opportunities we have available. Upon approval your email address will be added to our "Call for Volunteers" email list and to our Facebook Volunteer Group. We appreciate your patience as we are a volunteer run organization.

Part I: Contact Information

NAME : _____ HOME PHONE: _____
 ADDRESS: _____ CELL PHONE: _____
 CITY: _____ STATE: _____ ZIP: _____ WORK PHONE: _____
 E-MAIL: _____ DRIVERS LICENSE NUMBER: _____
 OCCUPATION : _____
 EXPERIENCE OR SKILLS THAT YOU WOULD BE WILLING TO SHARE: (I.E. DATA ENTRY, COMPUTER, ETC.): _____

Part II: Volunteer Information

What type of volunteer jobs are you interested in? Fundraising Events Fostering Dog Walking Dog Park Visits
 PR/Media Committee Office Work (data entry, Quickbooks, administrative tasks) Other (please note) _____

Are there any restrictions that could affect your ability to volunteer? YES NO

IF YES, PLEASE EXPLAIN:

In case of emergency notify:

NAME : _____ PHONE: _____

Hours you are available?

MON: _____ TUES: _____ WED: _____ THUR: _____ FRI: _____ SAT: _____
 SUN: _____

How did you hear about SECONDHAND MUTTS? _____

Do you have any prior experience as a volunteer? Yes No

If yes, for what organization(s)? _____

What were your duties? _____

Please share anything else we may find helpful regarding yourself or your skills for being a volunteer:



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2603 Scranton Road • Cleveland, OH 44113 • 216-621-6888 phone • 216-373-4902 fax • rescue@secondhandmutts.org

VOLUNTEER NAME:	
ADDRESS:	
CITY, STATE, ZIP:	
PHONE NUMBER:	

VOLUNTEER WAIVER AND RELEASE

I, _____, on this ____ day of _____, 2011, hereby fully and forever waive, release, hold harmless, indemnify and defend Secondhand Mutts and its respective employees, volunteers, agents, officers, board members, trustees, successors and assigns, together with their insurance carriers (collectively "Secondhand Mutts"), from and against any and all actions, claims, demands, causes of actions, lawsuits, controversies, expenses or damages of every nature whatsoever, which I may have now or in the future against Secondhand Mutts, for any and all personal injuries of any kind and nature, mental or emotional injury, including but not limited to any claim of intentional or negligent infliction of emotional distress, as well as any and all other types of losses, including property damage, all economic and non-economic claims, injuries to other pets and other damages, known and unknown, arising out of or attributable to my service and participation as a volunteer of Secondhand Mutts.

I understand that as a volunteer of Secondhand Mutts, I may be exposed to certain risks, including but not limited to injuries related to the care, handling and proximity to animals. By my signature below, I voluntarily agree to assume and/or incur all risks of loss, impairment, damage or injury of whatever kind, including economic and non-economic, physical, emotional, psychological or psychiatric injuries and damages, including death, that may be sustained or suffered in connection with my service and participation as a volunteer of Secondhand Mutts whether or not due to, in whole or in part, the acts, omissions, negligence or other fault of Secondhand Mutts. I understand that as a volunteer of Secondhand Mutts, I am not covered by Workers' Compensation or any other insurance policy of Secondhand Mutts for any damages or injuries I may sustain through my service and participation as a volunteer.

I am aware that as a volunteer of Secondhand Mutts I am acting as its representative, and I agree to act responsibly at all times by maintaining a professional demeanor and protecting the organization's rescued animals by abiding by Secondhand Mutts' policies and procedures, the directives of Secondhand Mutts' staff, and by practicing common sense and responsible animal handling techniques.

I, the undersigned, have read this waiver and release and understand all of its terms, and I execute it voluntarily and will full knowledge of its significance.

Dated: _____

In Witness Whereof:

Witness (SHM Representative) Signature

Volunteer Signature

Print Witness

Print

Name: _____

Name: _____

Address: _____

ALL SIGNED WAIVERS ARE TO BE RETURNED TO REPRESENTATIVE OF SECONDHAND MUTTS