



Rd. - Lima, OH 45807

3606 Elida

(419)991-1775

Volunteer Application

Date: ___/___/___

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell
Phone: _____

Email: _____ Birth Date: ___/___/___

Emergency
Contact: _____ Relationship: _____ Phone: _____

Are you at least 18 years of age? If no, a parent must sign your wavier of liability. _____

Do you have any pets? _____ If yes, are they spayed or neutered?

List any additional information that may be useful (i.e. special skills, training, interests, and hobbies):

Areas of Interest (check all that apply):

Clerical Community Events Fundraising Foster Dogs Foster Cats

Foster Horses and/or other farm animals

Facility Maintenance Animal Transport Cat Socializing Dog Socializing

___Cat Care ___Dog Care ___Grooming ___Housekeeping (Laundry, Dishes, General Facility Cleaning)

Please indicate time(s) you are available to volunteer with the days of week below:

Monday:_____ Tuesday_____

Wednesday_____

Thursday:_____ Friday:_____

Saturday:_____

Sunday:_____ Frequency/Days per week:_____ Days per

Month:_____

WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT FOR OHIO SPCA/HUMANE SOCIETY

1. In consideration for receiving permission to participate as a volunteer for the Ohio SPCA/Humane Society, I hereby RELEASE, WAIVE, DISCHARGE AND VOCENANT NOT TO SUE, Ohio SPCA/Humane Society, their officers, directors, agents, servants, or employees (hereinafter referred to as RELEASEES) from any and all liability, claims, demands, actions and causes of action whatsoever arising out of related to any loss, damage, or injury, including death, that may be sustained by me, or any of the property belonging to me, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES, or otherwise, while participating in such activity, or while in, on or upon the premises where the activity is being conducted.

2. I am fully aware of the usual risk involved and hazards connected with this activity, including but not limited to travel risks and/or risks of handling animals. I hereby elect to voluntarily participate in said activity with full knowledge that said activity may be hazardous to me and my property. I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISKS OF LOSS, PROPERTY DAMAGE OR PERSONAL INJURY, INCLUDING DEATH, that may be sustained by me, or any loss or damage of property owned by me, as a result of being engaged in such activity, WHETHER CAUSED BY NEGLIGENCE OF RELEASEES OR OTHERWISE.

3. I further hereby AGREE TO INDEMNIFY AND HOLD HARMLESS the RELEASEES from any loss, liability, damage or costs, including court costs and attorney fees, that they may incur due to my participation in said activity, WHETHER CAUSED BY NEGLIGENCE OF RELEASEES or OTHERWISE.

4. I UNDERSTAND that Ohio SPCA/Humane Society does not maintain any insurance policy covering any circumstanced arising from my participation in this event or any activity associated with the facilitating that participation. As such, I am aware that I should review my personal Insurance portfolio.

5. It is my express intent that this Waiver of Liability shall bind the members of my family and spouse, If I am alive, and my heirs, assigns and personal representative, If I am deceased, and shall be deemed as a RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO SUE the above-named RELEASEES. I hereby further agree that this Waiver of Liability and Hold Harmless Agreement shall be construed in accordance with the laws of the State of Ohio.

6. IN SIGNING THIS RELEASE, I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing Waiver of Liability and Hold Harmless Agreement, understand it and sign it voluntarily as my own free act and deed; no oral representations, statements, or inducements, apart from the foregoing written agreement, have been made; I am at least eighteen (18) years of age and fully competent; and I execute this Release for full, adequate and complete consideration fully intending to be bound by same. If I am under eighteen (18) years of age, my parent or guardian has also signed below and consented to my participation as a volunteer for the Ohio SPCA/Humane Society subject to the terms and conditions hereof.

Signed on this _____ day of _____, 20_____.

VOLUNTEER

Signature _____ Printed Name

PARENT OR GUARDIAN (IF VOLUNTEER IS UNDER 18)

Signature _____ Printed Name

Ohio SPCA/Humane Society Volunteer Coordinator

Signature _____

Revised September 2016