

# Humane Society of the High Plains

## Volunteer/Community Service Form

Name \_\_\_\_\_ Age \_\_\_\_\_

Mailing Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone – Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

I'm Interested in Helping With \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

### Adult Volunteers/Community Service

I will be volunteering/performing community service for the Humane Society of the High Plains by signing this document I understand and agree to the following:

1. I will abide by the missions, rules, regulations, policies and procedures while I am volunteering/performing community service at the Humane Society of the High Plains.
2. I assume the risks of being bitten, scratched or injured by animals at the Humane Society of the High Plains in connection with my volunteer/community service work.
3. I understand that the Humane Society of the High Plains may reject a volunteer/community service worker for any reason.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Humane Society of the High Plains Staff Signature \_\_\_\_\_

### Parent/Legal Guardian Release for Volunteer/Community Service

My 16/17 year old child will be volunteering/performing community service for the Humane Society of the High Plains. By signing this document I understand and agree to the following:

1. I give my child permission to volunteer/perform community service without my supervision at the Humane Society of the High Plains.
2. My child is mature enough to participate in activities with the companion animals.
3. I acknowledge that there are risks when volunteering/performing community service. This may include being bitten, scratched, injured or frightened, and I assume such risks.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Humane Society of the High Plains Staff Signature \_\_\_\_\_