## 2014 Volunteer Application and Contract Humane Society of Iredell PO Box 1617 Statesville, NC 28687 704-663-3330 iredellhumane@yahoo.com



Name	Date of Birth
Address	
	Zip
	Cell Phone
Email Address	
Driver's License #	
Employer/Occupation	
Work Phone	May we call you there?
Does your employer m	ake donations based on your volunteer hours?
In case of emergency	notify
Home Phone	Cell Phone Work Phone
Relation to Applicant	
Indicate the types of vo Adoption Center Gene	olunteer work you would be interested in. Training is provided.
<ul> <li>Adoption Fair</li> <li>Foster Care of</li> <li>Foster Care of</li> <li>Petsmart Cat</li> <li>Adoption Cent</li> <li>Special Events</li> <li>Fundraising/ P</li> <li>How many pets do you</li> </ul>	Assistance 2nd,4th, and 5th Saturday's Petsmart (Cats) Assistance 2nd, 4th, and 5th Saturday's Adoption Center (Dogs) Dogs in your home Cats in your home cage Cleaner er Cat Cage Cleaner  R I have at home? cats dogs
	utered and up to date on vaccines?
Veterinarian reference	:
Please list any qualific	ations you have that could be helpful to H.S.I.
Please list any constrai	nts or restrictions that may affect your ability to volunteer
with all of the Humane Soc immediate termination as a Waiver and Release: I release	osition as a volunteer for the Humane Society of Iredell, and in doing, I agree to comply lety of Iredell's rules and policies and I understand that a failure to do so may result in my volunteer initials  ase the Humane Society of Iredell, and all of its employees, agents, and board members,
understood by the parties to	ture, whether or not the basis of such liability is presently know to either party. It is this agreement that I/we will not bring suit or any charges against the Humane Society of its, board members, or pet owners. This agreement shall be binding on all parties, their heirs
Volunteer Signature_	Date
Adult/Guardian Signa	ture (if under 18 years)