

CARBON COUNTY FRIENDS OF ANIMALS

**VOLUNTEER CONTRACT**

Check One: \_\_\_\_\_ I am volunteering

\_\_\_\_\_ I owe community service work: # of hours \_\_\_\_\_\_\_\_

\_\_\_\_\_ I need to complete a Senior Project: # of hours \_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Name & Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**By signing below, the volunteer and his/her parents (if under 18 years of age) understand that by volunteering at the Carbon County Friends of Animals is not without certain risks. I therefore agree to abide by shelter polices and comply with directives by staff, shelter manager and board members. The volunteer will:**

1. Report directly to the manager or employee in charge upon arrival.
2. Keep confidential all information acquired during the service.
3. Provide advance notice of dates and times the volunteering will be rendered and if unable to attend a scheduled, the volunteer is required to phone the shelter and advise staff.
4. Authorize the shelter to seek emergency medical treatment in case of an accident, injury, or illness.
5. The volunteer and his/her parents (if under 18 years of age) understand that the volunteer is not covered by workman’s compensation.
6. Abide by the terms of this agreement or will otherwise be terminated from the program by the shelter manager and/or a board member.
7. Understand that safety must always come first.
8. Not to interfere with the daily operations of the shelter and will not loiter or occupy seating behind the front desk.
9. Refer all customer questions on polices, adoption, etc. to staff.
10. The volunteer must clean up after him/herself. Things must be returned to their original locations.
11. Will not handle ANY animal without first checking with the manager or staff. Will not touch any animal being turned into the shelter as it may not be vaccinated and may bite or scratch.
12. Kittens may not be removed from the room or cage they are housed in without staff approval.
13. Report any injury or problems discreetly to the shelter manager or staff member.
14. The volunteer and/or his/her family (if under 18 years of age), understand that by volunteering at an animal shelter contains certain risks due to exposure to animals and other illnesses. The volunteer may be exposed to or may carry home an illness to his/her own pet.
15. Tobacco products are not permitted on shelter grounds. An adult volunteer may use tobacco in his/her vehicle while on break, but never discard cigarette butts on shelter grounds.
16. The use of cell phones is prohibited in the shelter.
17. The use or possession of illegal drugs or alcohol shall result in immediate and possible criminal action.
18. If you own a pet, it is highly recommended that upon your return home all clothing be immediately placed into an area (i.e. washing machine) in order to avoid the spread of illness to your pet.
19. If you have been tested or tested positive for Corona Virus (Covid-19) inform shelter manager.

**The volunteer and his/her parents (if under 18 years of age) hereby release and hold harmless, the Carbon County Friends of Animals, it’s employees, shelter manager, board of directors, other volunteers, their family and friends from any and all liability of any nature, for injury or damage to property that the volunteer may suffer while on shelter grounds, including but not limited to traveling to and from the shelter or any shelter function or while attending any shelter function.**

Parent/Guardian Signature for Volunteer under 18 years of age:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Volunteer Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FILE ORIGINAL IN VOLUNTEER FOLDER & SUPPLY VOLUNTEER WITH A COPY.**

Revised: December 2020