

Volunteer Update form 2010

Name _____
Address _____ Apt# _____
City _____ State _____ Zip _____
Phone () _____ Cell () _____
Email address _____

Is this a change from 2009? Yes _____ No _____

If yes, please list previous information:

Name _____
Address _____ Apt # _____
City _____ State _____ Zip _____
Phone () _____ Cell () _____
Email address _____

Emergency contacts:

Name _____ Phone () _____
Name _____ Phone () _____

___ I am covered by medical insurance.
 Company _____ Policy # _____
___ I am able to lift at least 10 lbs.
___ Do you have any physical limitations? Yes _____ No _____
 If yes, please describe: _____
___ I am current on my tetanus vaccine (year of vaccine: _____)

Please check the orientations you have attended:

___ Dog Walking ___ Cat Grooming ___ Community Events
 ___ Customer Service ___ Newspaper/Laundry

Please note: We have expanded and combined some of the volunteer jobs for 2010. Please view our new volunteer job descriptions listed on our website. If you would like to attend one of the new orientations (no fee for active volunteers) or just get a "refresher course", please email me at terry.rozyla@geneseehumane.org. I'll contact you regarding orientation dates.

Signature _____ date _____
If under age 18, parent or guardian must sign also:
Parent/guardian _____ date _____

*Be sure to also sign the "Tetanus Waiver" and "Hold Harmless" for 2010!

Hold Harmless agreement

I agree to hold harmless the Humane Society of Genesee County in the event of any bodily (or other) injury to myself while at the shelter or on shelter related business while working as a volunteer. I acknowledge that I have been advised to secure any insurance needed to serve as a volunteer for the Humane Society of Genesee County.

I have read, understand and agree to the above

Volunteer Signature: _____ Date: _____

Parent/Guardian signature (if under 18):

_____ Date: _____

Tetanus Waiver

I understand that because I may handle animals, a tetanus shot may be required for volunteers (if designated in job description). I am responsible for providing a copy of my tetanus shot record when my volunteer application is submitted. I release the Humane Society of Genesee County from all responsibility in the event of an animal bite or injury.

I have read, understand and agree to the above

Volunteer Signature: _____ Date: _____

Parent/Guardian signature (if under 18):

_____ Date: _____