

Olympic Peninsula Humane Society

PO Box 3124 Port Angeles, WA 98363



Volunteer Application

Thank you for your interest in volunteering with the homeless animals at the Olympic Peninsula Humane Society. Volunteers are the backbone to keeping the Peninsula's homeless animals healthy and happy. Whether you want to help better the lives of the homeless animals, or you want to prevent abuse by raising awareness of the tragedies that occur when people stop caring for animals, your efforts really make a difference!

All volunteers must attend a New Volunteers Orientation. Orientation can be held at the time you fill out the application, if staff is available to do so, or at a time scheduled with our volunteer coordinator.

Volunteers are asked to work a minimum of twice a month. Volunteer hours are 10 am to 5 pm Monday through Saturday, and other hours that will vary during special events.

Hours accumulated are not to be used for court-ordered community service or probation purposes.

Volunteers between the ages of 12 and 15 **must** volunteer with their parent or legal guardian. Both individuals must attend New Volunteer Orientation. Volunteers under the age of 16 volunteering at the shelter or OPHS event without a parent or guardian will be asked to leave, and return with a parent or guardian.

Please fill out this application and either email, mail, or fax the application to the Volunteer Coordinator as soon as possible to reserve a spot in your desired orientation session. Please note on the application which orientation date you wish to attend. Please send this application to:

PO Box 3124
Port Angeles, Washington
360-457-8206
360-452-4157 (fax)
cchumane@cchumane.com

VOLUNTEER OPPORTUNITIES

Check areas of interest

___ **Dog Attendant** Help staff maintain sanitary and healthy environment. Clean Kennels, feed and water. Wash laundry, dishes. Replace bedding.

___ **Dog Groomer** Brush, give one-on-one attention, improve appearance.

___ **Dog Walker** Take dogs to designated areas to exercise and socialize

___ **Cat Attendant** Help staff maintain sanitary and healthy environment. Clean kennels, feed and water, change litter, replace bedding. Wash laundry, dishes and litter pans.

___ **Cat Cuddlers** Provide socialization by holding, brushing, playing with cats and kittens. Strict sanitation rules must be followed to prevent spread of disease.

___ **Foster Home Program** Care for animals in your home. There is a special need for care of very young or very ill animals, pregnant cats, animals that have been at the shelter too long, and those with special needs. This requires an additional interview, home visit from OPHS, and an orientation. Assistance is provided by the shelter.

___ **Mobil Adoptions** Assist in setting up and breaking down the mobile adoption area. Handle adoptable animals. Talk to potential adopters. Dates and locations are available by email monthly. This opportunity can require a high level of physical activity. Some locations are out doors.

___ **Transporting Animals** Take animals to vet or special events, transfer to other adoption agencies.

___ **Maintenance/Housekeeping** Help keep the office/buildings/facility clean and in proper working order. Maintain appearance and accessibility of grounds. Laundry, sorting donations, food, organizing storage areas, weeding, cutting grass, small repairs/construction, etc.

___ **Fund Raising/Marketing Promotion** Assist in soliciting donations and sponsorships from community. Help prepare, and distribute flyers and collect donation containers.

___ **Public Relations** Take photos for Newsletter, website and help maintain animal bios and Pet Finder entries.

Attend special events to talk to public. Make presentations to schools/organizations about pet care, safety, and prevention of animal abuse. Greet visitors at shelter, assist in selecting appropriate adoptees, telephone outreach, acknowledge donations/assistance from public.

___ **Grant Writing** Work with others to research and compile grants to alleviate the financial short falls.

PERSONAL INFORMATION

Date of Application ___/___/___
Preferred Orientation Date ___/___/___

Please print this information

First Name _____ Last Name _____

Nick Name _____

Street Address _____ City _____ State _____

Zip _____ Date of Birth _____ Email _____

Home Phone _____ Work Phone _____ Cell Phone _____

Best method of contact _____

Education: (Circle Last Year Completed) High School 1 2 3 4 College/Graduate 1 2 3 4 5 6 7 8 9

Occupation: _____

Does your company have a Matching Gifts policy for volunteer service? _____

May we contact you on your work or cell phone? _____

In case of an emergency, whom should we contact? Please print this information

Name _____ Relationship _____

Day Phone _____ Evening Phone _____ Email _____

If you will be volunteering with a child between 12 and 15 years of age, please fill out the following information.

Child Name Volunteer's _____

Date of Birth _____

What is your relationship with the child? _____

Child's emergency contact: _____

Day Phone _____ Evening Phone _____

Email _____

Do you have any pets? If yes, let us know how many and their ages. _____

Are your animals spayed or neutered? _____

Have you ever visited an animal shelter before? _____

Do you have any experience as a volunteer? If yes, with what organization(s)?

How did you hear about our volunteer program? _____

Why do you want to volunteer with us? _____

Do you have any physical restrictions, medical limitations or allergies? _____

Please list any special skill that you may have that would be helpful to the shelter such as graphic design, accounting, carpentry, landscaping, web site administration, photography, media relations, fundraising, etc.

How often would you like to volunteer? _____

Volunteering at the Olympic Peninsula Humane Society does require contact with the public, especially on the weekends. Even working in direct animal care there will be times when you will be asked to help the public as they inquire about adoptable animals. Are you comfortable with this? Please explain why or why not. _____

Although the Olympic Peninsula Humane Society does not have a "time limit" on adoptable animals, occasionally we must euthanize animals that become ill or have behavior issues. How do you feel about this?

Volunteer Agreement and Contract

Adult /Youth

Initials/ Initials

_____ & _____ I agree to conduct myself in a courteous and professional manner as a volunteer and as a representative of the Olympic Peninsula Humane Society.

_____ & _____ I agree to abide by all Olympic Peninsula Humane Society Policies and Procedures.

_____ & _____ I authorize the Olympic Peninsula Humane Society to contact the emergency contact on this application and seek emergency medical care in case of accident, injury, or illness.

_____ & _____ I agree that my services are provided on a volunteer basis without pay or compensation of any kind and all services are to be performed at my own risk.

_____ & _____ I have received a Tetanus vaccination in the last 10 years. I have provided proof of this medical record. I understand I cannot participate in any direct animal care until I sign a tetanus waiver.

_____ & _____ I understand that before I can begin to volunteer I must attend an orientation. Orientations are held by appointment at the OPHS shelter.

_____ & _____ I understand that in handling animals and performing other volunteer's task there does exist a risk of injury including physical harm caused by the animals.

_____ & _____ I hereby allow the OPHS to use any photographs taken of me on property or at a special event for public relation purposes.

_____ & _____ I agree that on behalf of myself, my heirs, personal representatives and executors, do release, discharge, indemnify, and hold harmless the Olympic Peninsula Humane Society, its agents, employees, directors and board of directors from any and all claims, causes of action, or demands of any nature of cause. Including but not limited to, costs and attorneys fees incurred by the Olympic Peninsula Humane Society in connection with the same, based on damages or injuries which may be incurred or sustained by me in any way connected with my services for the Olympic Peninsula Humane Society including but not limited to animal bites, accidents, or injuries.

_____ & _____ I understand as Family Team Members I will volunteer my time working as a team the entire time I am on Olympic Peninsula Humane Society property. A violation of this rule will result in the possibility of being terminated from the volunteer program.

Adult signature: _____

Print name: _____

Youth signature: _____

Print name: _____

Tetanus Vaccination Waiver-Adult Volunteer

A tetanus shot is required before direct animal contact at the Olympic Peninsula Humane Society. By signing this waiver, I affirm that I have had a tetanus shot within the last 10 years.

I understand the requirement of a tetanus vaccination. I agree that on behalf of myself, my heirs, personal representatives and executors, I release, discharge, indemnify and hold harmless the Olympic Peninsula Humane Society. Along with, its agents, employees, directors and board of directors from any and all claims, causes of action, or demands of any nature of cause. Including but not limited to costs, and attorneys fees incurred by the Olympic Peninsula Humane Society in connection with the same, based on damages, or injuries which may be incurred or sustained by me in any way connected with my services for the Olympic Peninsula Humane Society including but not limited to animal bites, accidents, or injuries.

Date _____

Signature _____

Printed Name _____

Tetanus Vaccination Waiver-Jr. Volunteer

A tetanus shot is required before direct animal contact at the Olympic Peninsula Humane Society. By signing this waiver, I affirm that I have had a tetanus shot within the last 10 years.

I understand the requirement of a tetanus vaccination. I agree that on behalf of myself, my heirs, personal representatives and executors, I release, discharge, indemnify and hold harmless the Olympic Peninsula Humane Society. Including, but not limited to, its agents, employees, directors and board of directors, from any and all claims, causes of action, or demands of any nature of cause, including but not limited to costs and attorneys fees incurred by the Olympic Peninsula Humane Society. In connection with the same, based on damages, or injuries, which may be incurred or sustained by me in any way connected with my services for the Olympic Peninsula Humane Society including but not limited to animal bites, accidents, or injuries.

Date _____

Signature _____

Print name: _____