

Volunteer Application

Name			Daytime Phone	Evening Phone
Street Address			Cell Phone	Birthday
City	State	Zip	Email address	

How did you learn about Clowder House?

Have you ever volunteered or worked for another animal organization? If yes, which organization(s):

Please check the days and times that you are can assist:

- | | | |
|--------------------------------------|----------------------------------|---|
| <input type="checkbox"/> Monday - | <input type="checkbox"/> daytime | <input type="checkbox"/> evening |
| <input type="checkbox"/> Tuesday - | <input type="checkbox"/> daytime | <input type="checkbox"/> evening |
| <input type="checkbox"/> Wednesday - | <input type="checkbox"/> daytime | <input type="checkbox"/> evening |
| <input type="checkbox"/> Thursday - | <input type="checkbox"/> daytime | <input type="checkbox"/> evening |
| <input type="checkbox"/> Friday - | <input type="checkbox"/> daytime | <input type="checkbox"/> evening |
| <input type="checkbox"/> Saturday - | <input type="checkbox"/> morning | <input type="checkbox"/> afternoon <input type="checkbox"/> evening |
| <input type="checkbox"/> Sunday - | <input type="checkbox"/> morning | <input type="checkbox"/> afternoon <input type="checkbox"/> evening |

What type of assistance are you willing to provide?

VOLUNTEER AGREEMENT

As a condition of volunteering at Clowder House, I agree to follow all the rules and recommendations established by the Director, the Clowder House veterinarian, and/or the Clowder House Executive Board. I further understand that I will need to attend an orientation meeting at Clowder House and that I will be contacted by the Director to schedule that meeting. I also agree to follow all procedures set forth in the volunteer handbook to the best of my abilities and to endeavor to take the best care possible of the building and all equipment and supplies on the premises. If, for any reason, I choose to bring guests to Clowder House to visit the facility and/or the cats, I will contact the Director and secure her/his approval prior to any such visit. I also will do my utmost to respect the sanctity of Clowder House, its governing Board, officers, members, fellow volunteers, and Clowder House resident cats, wherever they may be located.

To ensure the well-being of all cats at Clowder House, if at any time, it is determined that I am not complying with the rules or have become a detriment to Clowder House in any fashion, I agree to terminate my volunteer activities and association with Clowder Hose in a peaceful manner and to immediately return all keys and/or any other supplies, equipment or Clowder House cats in my possession when so informed by the Director or by Board member acting at the request of the Director.

I further understand that there is possibility of health or injury risk inherent in caring for cats. I will not hold Clowder House liable for any injury or illness that may result from my volunteer activities. If I am pregnant, or might be pregnant, I will avoid any and all contact with cats or litter boxes while volunteering for Clowder House.

I hereby affirm that I have never abused, neglected or exploited any animal.

Dated:

Signature:

For Office Use Only

Date Application Received	Date Application Approved	Volunteer Given Keys	Volunteer Given Access Code
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Comments: