



Humane Society of Lake County Volunteer Application

Thank you for your interest in helping our no-kill shelter.

Contact Information

Name: _____ Phone (H): _____ (C): _____

Address: _____

Email: _____ Are you over age 18? Yes _____ No _____

How would you like to help? (Check off all that you are interested in)

Shelter: Dog Walking and Care _____ Cat Care _____
Maintenance/Cleaning _____ Office Work _____

Pet Fostering! _____

Thrift Shop: Donation Sorting/Shelving _____ Cashier _____

Outreach/Fundraising:

Assisting at Community Events _____ Planning/Organizing Community Events _____

Special skills or experience (Grant writing, handyman, newsletter, etc.)

A few more questions:

How did you hear about us? _____

Why do you want to volunteer with the Humane Society of Lake County? _____

Tell us a little about any relevant work and/or volunteer experience. _____



Humane Society of Lake County

Liability Wavier, Photo Release, and Confidentiality Agreement

Liability Waiver

I hereby fully and forever release and discharge the Humane Society of Lake County (HSLC), its agents, employees, directors, officers and all liability insurance carriers from all actions, damages or judgments which I may have, now or in the future, against the HSLC, for all personal to myself, known or unknown and/or arising out of the activities of myself as a volunteer.

The policies, procedures and objectives of the HSLC have been explained to me and I agree to follow and abide by their guidelines. I have read this release, understand all its terms and I execute it voluntarily and with full knowledge of its significance.

Photo Release

For valuable consideration, the receipt and sufficiency of which is hereby acknowledged, and being sole and final compensation to which I am entitled, I hereby give the Humane Society of Lake County, its successors or anyone acting under its authority or permission the absolute and unqualified right and permission to make, copyright, publish or use photographs of me, or in which I may be included in whole or part, or reproductions thereof in color or others anywhere and as often as desired, for art, advertising, commercial trade, public or private purposes; in any media, for any and all other lawful purposes whatsoever, which may, in its discretion, deem proper.

In addition, I understand and agree that such photographs, negatives and transparencies shall remain the exclusive property of the HSLC. It is my further understanding and agreement that by these presents do transfer and convey to the HSLC any and all right, titles, or interest I may have in these photographs, negatives, transparencies or copies thereof and all monies, proceeds or values that may be derived or received therefore. I hereby warrant that I have full legal capacity to execute this release.

Confidentiality Agreement

All HSLC records and information relating to HSLC (including customers, volunteers, and donors) are confidential and volunteers must treat all matters accordingly. No HSLC or HSLC-related information, including without limitation: documents, notes, files, records, oral information, computer files, or similar materials (except in the ordinary course of performing duties on behalf of HSLC) may be removed from HSLC's premises without permission from HSLC.

The contents of HSLC's records or information otherwise obtained in regard to business may not be disclosed to anyone, except where required for a HSLC business purpose. Volunteers must not disclose any confidential information, purposefully or inadvertently through casual conversation, to any unauthorized person inside or outside HSLC. Volunteers who are unsure about the confidential nature of specific information must ask their manager for clarification. Knowingly, or unknowingly revealing information of a confidential nature violates HSLC policy.

Signature _____ Printed Name _____ Date _____



Humane Society of Lake County

References and Emergency Contacts

Person to Notify in Case of Emergency:

Name _____ Phone: _____ Relationship _____

Street Address _____

City _____ State _____ Zip _____

References:

Please list two people we may contact who are not family members. You may include employers, teachers, community leaders, or others whose relationship to you is more than a personal friend.

Name: _____ Phone: _____ Relationship: _____

Street Address: _____

Name: _____ Phone: _____ Relationship: _____

Street Address: _____

I give my consent for the Humane Society of Lake County to contact my references as needed.

Signature _____ Date _____

Someone will be in touch to talk to you about this volunteer opportunity. Thank you!