



## Adult Volunteer Application

Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Best time to call \_\_\_\_\_

Alternate Phone # \_\_\_\_\_ Best time to call \_\_\_\_\_

E-mail address \_\_\_\_\_

Are you a member of the Humane Society of Goodhue County? YES NO

What days and times are you available? \_\_\_\_\_

Please check your areas of interest:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Dog Walking     | <input type="checkbox"/> Office/Clerical work | <input type="checkbox"/> Assisting with the |
| <input type="checkbox"/> Cat Socializing | <input type="checkbox"/> Reception            | Newsletter                                  |
| <input type="checkbox"/> Animal Care     | <input type="checkbox"/> Building and Grounds | <input type="checkbox"/> Grant Writing      |
| <input type="checkbox"/> Cleaning        | Maintenance                                   | <input type="checkbox"/> Other _____        |

What special skills do you have that you would be willing to offer to the Humane Society? \_\_\_\_\_

I understand that I am volunteering to work for the Humane Society of Goodhue County, Inc. I understand that the nature and the risks of working with animals, and in the event that I am bitten, scratched or otherwise injured by an animal in the course of the these activities, I will hold the Humane Society of Goodhue County, Inc. harmless from any claims for personal injuries arising out of such an incident.

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Thank you for your interest in volunteering with the Humane Society!*