

# ***Kokomo Humane Society***

**713 North Elizabeth St.  
Kokomo, Indiana 46901  
Phone 452-6224**

## **Volunteer Application**

Thank you for your interest in volunteering with Kokomo Humane Society! Without your support, we would not be able to assist nearly as many animals that need our help. Individuals must be sixteen years old to volunteer independently. Children ages 10-15 may volunteer if accompanied by a parent volunteer at all times.

Please complete the Volunteer Application below. Specifics about each volunteer activity will be discussed further in the orientation meeting. Depending on the activities you choose, additional training may be required. Thank you again!

Name \_\_\_\_\_ Date \_\_\_\_\_

**Full** Address \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Other \_\_\_\_\_

Email \_\_\_\_\_ Date of Birth \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_

Contact's Phone \_\_\_\_\_

Employer Name and Address \_\_\_\_\_

Education (last year completed) \_\_\_\_\_

### **Please choose your area(s) of interest from the following:**

\_\_\_ Dog Volunteer

\_\_\_ Photography/PETFINDER website

\_\_\_ Cat Volunteer

\_\_\_ Laundry (can be done at home)

\_\_\_ Adoption Follow-up calls

\_\_\_ Help at events, fairs, etc.

\_\_\_ Foster Care

\_\_\_ transport pets to groomers (a.m. only)

\_\_\_ Mass mailings/Computer Skills

\_\_\_ adoption counselor at Petco

\_\_\_ Facility lawn care

Other \_\_\_\_\_

How did you hear about our volunteer program? \_\_\_\_\_

When can you begin volunteering? \_\_\_\_\_

Have you volunteered here in the past? When? \_\_\_\_\_

We are open Mon. through Fri. noon-6 p.m. and Sat. 11 a.m.-4 p.m. Please list the days and times you prefer:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

What are your special skills that may be useful to KHS? \_\_\_\_\_

\_\_\_\_\_

What pets do you have now or have had in the past? What other experience have you had with animals? \_\_\_\_\_

\_\_\_\_\_

What are your thoughts on euthanasia (putting animals to sleep)? \_\_\_\_\_

\_\_\_\_\_

I am interested in you! Tell about your interests, hobbies and **other organizations for which you've volunteered.** Also, we want your experience here to be rewarding so please let me know if there are any difficulties or limitations I need to know about or that may require extra training.

\_\_\_\_\_

\_\_\_\_\_

*Thank you for taking the time to complete this form. We at KHS hope that you enjoy your volunteering experiences here and we look forward to welcoming you. Volunteering is very rewarding and we appreciate your willingness to be involved! We will contact you soon.*

Melissa Devendorf  
Volunteer Coordinator, KHS

*You have never really lived until you've done something  
For someone who can never repay you.--Unknown*

*No act of kindness, however small, is ever wasted.--Aesop*

***Kokomo Humane Society***  
Service Agreement for Registered Volunteers

**Please read and sign the following:**

1. The Kokomo Humane Society Inc. shall:
  - a. Provide the Volunteer with such training, supervision, staff support, work space, uniforms, literature and supplies as KHS Inc. deems necessary to enable the volunteer to perform his/her donated services.
  - b. Interact with the volunteer in a respectful, courteous and professional manner.
  
2. The Volunteer:
  - a. **Must provide proof of health insurance and tetanus vaccination to KHS.**
  - b. Agrees that work is completely voluntary and shall perform work under this agreement in an efficient manner at such times as agreed.
  - c. Has no physical, emotional or psychological conditions which would be aggravated by performing the work of this agreement. Volunteer assumes all risks for any aggravation of existing conditions.
  - d. Will not be disorderly and will consume no alcohol or unprescribed drugs while volunteering under this agreement.
  - e. Waives the rights to worker compensation or any other employee insurance or benefits. Volunteer is not an employee of KHS Inc.
  - f. Shall not hold KHS Inc. and their board of directors, agents and employees responsible for any and all claims or threat of claims, loss, liability, injury, judgment or lien, arising out of any acts or omissions made by anyone (including themselves) under this agreement, including costs and attorney fees incurred in conjunction with such claims or threat of claims.
  - g. Will interact with staff and guests in a respectful, courteous and professional manner.
  - h. Will follow safety rules presented at training, use equipment and supplies as intended, report all injuries immediately to staff and keep safety at forefront of all volunteer activities.
  - i. Will perform tasks to best of his/her ability, recognize his/her own limitations with the animals and other activities, ask for help when needed, recognize training is essential to safe shelter practices.

KHS Inc. may terminate this agreement at any time without notice should volunteer be found negligent in his/her duties.

**Volunteer** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent or Guardian (if applicable)** \_\_\_\_\_

Office use:

\_\_\_\_\_orientation  
\_\_\_\_\_interview  
\_\_\_\_\_insurance  
\_\_\_\_\_tetanus vac.