****

**Volunteer Information Form**

***Volunteer Services***

We wouldn’t be able to operate without the help of our dedicated volunteers! Being a non-profit organization, we rely on volunteers to manage and maintain day-to-day operations both at and outside of the shelter. Whether you’re interested in volunteering a few hours of your time during the week or fostering a dog or cat in need, your services make a world of difference to the animals in our care!

***Updated Volunteer Policies***

* Volunteers aged 12 to 15 may only work with the cats
* Only volunteers aged 16+ may work with the dogs
* Volunteers must be 18 or older to walk dogs outside of the yard

***What You Can Do to Help***

* Weekly scheduled services – If you are able to share your time on a regular basis we have a schedule at the shelter that you can sign up on
* Walk-in services – have an hour or two to spare in between errands? Pop by the shelter and see if they could use any help!
* Dog walking – Our dogs love to get a break from the shelter to go for a walk!
* Foster home program – Temporarily welcome a dog or cat into your family until they can find their forever homes
* Fundraising – Take part in our fundraising team to share ideas and help raise funds for the shelter
* Yard services – Have an extra hour or two to help cut grass or pull weeds? We really appreciate the help in the summer to keep our kennels neat for the dogs!

Office use only: Memberships\_\_\_ Volunteer\_\_\_ Membership & Volunteer\_\_\_

Membership expiration date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parkland Humane Society Inc. Volunteer / Membership Form**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/Town: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name/Age of all minors: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Member** **Please check your membership choice if desired and any volunteer choices**

Youth $10.00:           Age:          Individual $20.00          Family $30.00

Corporate: $50.00 to $250.00 Life Time $500.00 \_\_\_\_ Expiry: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Volunteer** **Please check when and/or how you would like to volunteer:**

**May we call you periodically to fill in shifts as needed?** YES NO (Please circle preference)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Drop-in | 8:30am–noon | 1pm-4:30pm | 6pm-8pm | Weekday | Weekend |
|  |  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Dogs/Puppies |  | Fundraising Events |  | Building Maintenance |  |
| Cats/Kittens |  | Foster Home |  | Spring Clean-up |  |
| Dog Walking |  | Yard Maintenance |  | Fall Clean-up |  |

**ACKNOWLEDGEMENT:** I and/or my child have entered into a volunteer relationship under the direction of the Board of Directors and acknowledge that I and/or my child shall not expect or receive any form of payment for volunteer services that I and/or my child contribute to PHSI. I recognize that I and/or my child can terminate our volunteer service at any time for any reason. PHSI also reserves the right to end my volunteer services whenever the PHSI deems it to be in its best interest. I understand volunteers are not covered by workers compensation legislation.

**RELEASE WAIVER AND IDMENITY:** I release PHSI, its servants, agents, and Board of Directors from any and all liability for any injury, damages, losses and expenses that myself and/or my child may suffer as a result of the volunteer relationship with PHSI. Further, I hereby indemnify and hold harmless the PHSI, its servants, agents, and Board of Directors from any and losses, damages, costs or expenses arising from any claims or demands, which may be made against PHSI arising out of or in consequence of myself and/or my child’s volunteer relationship with PHSI. I made and provide this Release, Waiver, and Indemnity on behalf of myself, my heirs, executors and assigns and anyone claiming by, through, or on my behalf or on the behalf of my child.

Volunteer Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Witness Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature (if minor): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

****

**Oath of Confidentiality for Volunteers**

I, the undersigned, agree that I will not disclose or make known to others outside the Parkland Humane Society Inc. Board of Directors any client information or matter which comes to my knowledge through my volunteer service with the Parkland Humane Society Inc. unless it is agreed upon by the board.

* I further acknowledge and agree that I will maintain this Oath of Confidentiality after my volunteer service with the Parkland Humane Society Inc. has been completed.
* I will be conscientious and trustworthy, fulfilling my duties with integrity and professionalism.
* I will fulfill my volunteer duties as promised by being on time for my volunteer duties, and providing as much notice as possible if I am unable to fulfill said duties.
* I will respect the dignity and rights of all others.
* I will foster a spirit of charity, goodwill and cooperation.
* I will support the objectives of the Parkland Humane Society Inc.
* I will declare any potential conflict of interest.

I will always remember…

What I see here, what I hear here, when I leave here, will remain here.

**Volunteer Name (Clearly Printed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Volunteer Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**