

SHAID TREE ANIMAL SHELTER VOLUNTEER FORM

l	, hereby acknowledge and agree that in consideration
of beir	ng permitted to participate in programs or activities, operated at or sanctioned by
S.H.A	I.D. Tree Animal Shelter Society (herein called "Shelter").

- 1. I do hereby release the Shelter, its members, officers, directors, employees, independent contractors and agents from all liability, and do hereby waive against the Shelter, its members, officers, directors, employees, independent contractors and agents all recourses and claims, causes of action of any kind whatsoever, in respect of all personal injuries or property losses which I may suffer arising out of or connected with my preparation for, or participation in, the aforesaid Shelter programs or activities, not withstanding that such injuries or losses may have been caused solely or partly at the negligence of the Shelter or any of its members, officers, directors, employees, independent contractors or agents.
- 2. And, I do hereby acknowledge and agree that:
 - The handling of any animals can be dangerous, exposing participants to many risks and hazards, some of which are inherent in the nature of the animal itself, others which result from human error and negligence on the part of the persons involved in preparing and organizing activities.
 - Some of the risks and hazards are foreseeable but others are not; nevertheless, I
 freely and voluntarily assume all aforesaid risks and hazards and understand that my
 preparation and participation in the aforesaid Shelter programs and activities shall be
 entirely at my own risk.
 - I understand that neither the Shelter nor any of its members, officers, directors, employees, independent contractors, or agents assume any responsibility for my safety during the course of my preparation for and participation in the aforesaid Shelter programs and activities.
 - I have carefully read this RELEASE, WAIVER AND ASSUMPTION OF RISK agreement, that I fully understand same and that I am freely and voluntarily executing same.
 - I understand that by signing this release, I will be forever prevented from suing or
 otherwise claiming against the Shelter or any of it's members, officers, directors,
 employees, agents or independent contractors for any loss or damage connected
 with any property loss or personal injury that I may sustain while participating in or
 preparing for any of the before mentioned Shelter programs or activities whether or
 not loss or injury is caused by negligence of the Shelter, its members, officers,
 directors, employees, independent contractors or agents.
 - I have been given the opportunity and have been encouraged to seek independent legal advice prior to signing this agreement.
 - I understand that the Shelter would not permit me to participate in any Shelter programs or activities unless I signed this RELEASE, WAIVER AND ASSUMPTION OF RISK agreement. I understand that this RELEASE, WAIVER AND ASSUMPTION OF RISK agreement applies to all the aforesaid Shelter programs



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and activities, whether occurring in the near or distant future, and that the terms of this agreement need not be brought to my attention each time I participate in such Shelter programs or activities to be effective.

- I understand that the term "Shelter program or activities" as used in this RELEASE, WAIVER AND ASSUMPTION OF RISK agreement includes, without limiting the generality of the term, the programs, and activities, as well as all other competitions, programs and events that are in any way authorized, sanctioned, organized or operated by the Shelter.
- I understand that this RELEASE, WAIVER AND ASSUMPTION OF RISK
 agreement is binding on myself, my heirs, executors, administrators, personal
 representatives and assigns.
- I understand clearly that the Shelter is, and shall be, deemed to be acting for itself, and its agent on behalf of, and for the benefit of the members, officers, directors, employees, independent contractors and agents of the Shelter for the purposes set out in the above stated clauses of this agreement.

IF YOU ARE UNDER 16, A PARENT OR GUARDIAN MUST READ/COMPLETE THE FORM AND BE PRESENT DURING YOUR VOLUNTEER HOURS AT THE SHELTER.

Volunteer Name & Signature	SHAID Volunteer Coordinator	Date	
VOLUNTEER INFORMATIO	ON:		
Date:			
Name:			
Email:			
Best phone number(s) for contact	t:		
Date of birth://	_		
May we contact you via email wit	h updates, events and fundraisers?	YES	NO



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"If volunteer is under 16:	
Name & Age:	
School & Grade:	
IN CASE OF EMERGENCY:	
Emergency Contact Name(s):	
Emergency Contact Number(s):	
Do you have any allergies that we need to be yes please list:	
Do you have any medical conditions/injuries t assigned to you OR that may cause an attack please list the condition or injury and what as	k or seizure (ie. diabetes, epilepsy) If yes
Volunteer Work Preferences: (check all tha	at apply)
Annual Fundraising	Fostering- seniors, animals with
Clerical/Office	special needs, bottle fed kittens
Community Outreach	Pet Transportation
Computer/Website	Shelter Cleaning
Dog Training	Special Events
Educational Programs	Other (please specify)
Outdoor Shelter Maintenance	-
Landscaping	



SHAID TREE ANIMAL SHELTER **VOLUNTEER FORM**

If you are interested in socializing cats or animal care and cleaning, are you able to commit to volunteering once a week or biweekly for certain shifts at SHAID?

YES	NO
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Animal care and cleaning shifts are between 9-11 AM. We aim to schedule volunteers for a maximum of 2 hours to allow opportunities for others. Due to the training involved, SHAID requests a certain level of commitment for animal care and cleaning. To ensure volunteers are trained and comfortable with our processes, these positions require a weekly/biweekly time commitment. SHAID relies on the helping hands of our volunteers and require a call or email to inform staff if you are unable to make it in a certain day.

IF	YES,	how	long	are	you	comn	nitted	to	volu	intee	ring	at	SHA	۱D	?
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and require a call or email to inform staff if you are unable to make it in a ce
IF YES, how long are you committed to volunteering at SHAID?
Less than 6 months
6 months

IF YES, what day and time works best for you?

6 months or more

Previous experiences, skills, strengths that may be helpful to SHAID:

Accounting Graphic Arts Computers Management Art/Crafts **Painting**

Educational events Photography

Public Speaking **Event Organizing**

Facilitating group activities Landscaping

Fundraising Other (please specify)

Animal Experience (check all that apply):

Boarding Facility Grooming

Farm Animals Pet Sitting

Foster Home