



Volunteer Application/Profile/Waiver

P.A.W.S. of Dearborn County & Humane Center
 200 Charles A. Liddle Drive, Lawrenceburg, IN 47025
 812-xxx-xxxx volunteer@pawsofdearborncounty.org
 www.pawsofdearborncounty.org/

P.A.W.S. of Dearborn County & Humane Center encourage the participation of Volunteers who support our mission which includes: To receive lost or unwanted animals brought to the Center; to return lost animals to their homes and place stray or unwanted animals in good homes; to humanely treat those which cannot be returned or placed; and to educate the public about the intelligent and humane treatment of animals.

All potential Volunteers are required to attend an orientation and position related training before placement in the Volunteer Program. We also ask that you commit to at least 2 each two-hour shifts per month. An increased time commitment is welcome. If you agree with our mission; are willing to attend the orientation and training, and are committed to P.A.W.S. of Dearborn County & Humane Center Volunteer Program, we ask that you complete this form so we may make an appropriate placement for you.

CONTACT INFORMATION

First Name		Last Name:	
Address:			
City:		State:	Zip:
Home Phone:	Cell Phone:	Work Phone:	
Email:			

DEMOGRAPHIC INFORMATION

Date Of Birth:	You must be 16 yrs. old to volunteer. Less than 16 yrs. contact Humane Education Director.		
Circle last year of school completed:	Grade/High: 1 2 3 4 5 6 7 8 9 10 11 12	College/Graduate: 1 2 3 4 5 6 7	
Are you currently enrolled in school: YES NO	Name of School:		

SKILLS AND EXPERIENCE

Please tell us if you have experience working with animals and explain your experience.

Do you have any experience working with animals? YES NO	If YES, please explain:	
Skills / Training: Please check all of the areas you feel you have moderate to excellent skill.		
Animal Enrichment	Computer Data Entry	Computer Office Programs
Dog / Cat Grooming	Dog Training	Electrician
Groundskeeper	Humane Education	IT Experience
Landscaper	Maintenance	Office / Office Equipment
Plumber	Receptionist	Secretarial
Shelter Cattery Aide Experience	Shelter Kennel Aide Experience	Vet Tech

HOBBIES, INTERESTS, CLUBS AND ORGANIZATIONS

Please tell us about your other interests.

Clubs And Organizations:

Hobbies And Interests:

PETS

Tell us about your pets.

Do you own dogs/cats: YES NO Are they spayed/neutered? YES NO If no, why?

Do you have any experience working with animals? YES NO If YES, please explain:

Please check the pets you have owned.

Birds	Cats	Dogs	Exotic
Fish/Aquariums	Hamsters/Guinea Pigs	Horses	Mice/Rats
Rabbits	Reptiles	Sheep/Goats	

AVAILABILITY

Please advice days and hours you are available. Example: 2pm-4pm, 8am-12pm, 8am-4pm

Monday (8am-4pm):	Tuesday (8am-7pm):	Wednesday (8am-4pm):
Thursday (8am-7pm):	Friday (8am-4pm):	Saturday (8am-4pm):
Sunday(8am-4pm):	Almost any time: Must commit to 4 (four) hours a month.	

ASSIGNMENT PREFERENCE

The following volunteer assignments may currently be available. Please check the volunteer assignments you are interested in.

NOTE: YOU MUST CHECK AT LEAST ONE ASSIGNMENT.

01 Cattery Aide:	02 Kennel Aide:	03 Reception / Front Desk / Clerical:
04 Cat Interactive Play / Socialization:	05 Dog Walking / Enrichment:	06 Housekeeping:
07 Groundskeeper:	08 Facility Maintenance:	09 Gift Shop:
10 Mobile Adoption:	11 Foster Program	12 Colerain PetSmart Cat Care
13 Humane Education	14 Off Site Events	15 Transports
16 Youth Parent / Guardian	17 Youth Community Events	18 Youth P.A.W.S. Fundraisers

EMERGENCY CONTACT

First Name:		Last Name:	
Home Phone:	Cell Phone:	Work Phone:	
Relationship:	City:	State:	

PARENT / GUARDIAN FOR OUR JUNIOR VOLUNTEERS (AGE 16 AND 17 YEARS)

First Name:		Last Name:	
Home Phone:	Cell Phone:	Work Phone:	
Relationship:	City:	State:	

EMPLOYER

What is your occupation?	
Employer name:	
City:	State:

EMAIL (WHAT'S YOUR EMAIL PREFERENCES?)

<i>Please check the kinds of email you would like to receive</i>		
Electronic newsletters:	Recruitment appeals:	Schedule reminders:

RELEASE / WAIVER

<p>I understand that the handling of animals and other Volunteer activities on behalf of P.A.W.S. of Dearborn County & Humane Center may place me in a hazardous situation and could result in injury to me or my personal property. On behalf of myself, and my heirs, personal representatives and assigns, I hereby release, discharge, indemnify and hold harmless P.A.W.S. of Dearborn County & Humane Center and its respective directors, officers, employees and agents from any and all claims, causes of action and demands of any nature, whether known or unknown, arising out of or in connection with my Volunteer activities on behalf of P.A.W.S. of Dearborn County & Humane Center. Further, I understand that public relations are an important part of a Volunteer's activities on behalf of P.A.W.S. of Dearborn County & Humane Center. I hereby authorize P.A.W.S. of Dearborn County & Humane Center to use any photographs of me (includes electronic/digital audio and video recordings) in its possession for public relations purposes. I ask that P.A.W.S. of Dearborn County & Humane Center use reasonable efforts to give me advance notice of any such use, but such notification is not a condition, either precedent or subsequent, to release photographs for public relations purposes.</p>	
Signature:	Date:
Print Name:	
If under age 18:	
Parent/Guardian Signature:	Date: