HHS AUXILIARY VOLUNTEER APPLICATION

MISSION STATEMENT: The Heritage Humane Society serves as the compassionate steward of companion animals that are in transition from stray/surrender to forever homes. Heritage Humane Society will also educate the public about humane animal care and treatment, advocate animal welfare, and provide affordable adoption services.

Please complete all applicable fields on the form. All volunteers must sign our Liability Waiver, which is a legally binding document.

Last Name:	First Name:
DOB: Address:	
	State: Zip Code:
Email:	
	Landline Phone:
Occupation:	
Emergency Contact & Relationshi	p: Phone:
Why are you interested in becomin	g an Auxiliary volunteer?
1 0 0	skills/experience that may prove useful to the Auxiliary: raining, public speaking, animal care/training/fostering, etc.)
Select all areas of volunteer interest (visit heritagehumane.org/auxiliary	st: y for more information on these events/fundraisers)
Belk Charity Sale	
☐ Critter Canisters	
Holiday Bazaar	
Holiday Fur Tree	
Hearts for Homeless Pets	
☐ Make Par for Pets Golf Classic	
Precious Pieces	
☐ Spring in Bloom Online Auctio	n
Unsure at this time	-

VOLUNTEER CONTRACT:
I, have read and understand the Auxiliary Membership Guide. I understand that if I do not abide by all of these rules, my service as a volunteer can be terminated or suspended. I also understand that these rules and guidelines are set forth to protect the animals, the staff and myself. I agree to conduct myself in a courteous and professional manner as a volunteer and as a representative of The Heritage Humane Society. I agree to abide by all of Heritage Humane Society's policies and procedures.
Printed Name:
Signature: Date:
Heritage Humane Society's Volunteer Release From Liability Form
In consideration of the opportunity to participate in the operation of The Heritage Humane Society (HHS), and in further consideration of the permission to enter for that purpos upon the premises of The Heritage Humane Society located at 430 Waller Mill Road, Williamsburg, VA 23185, the receipt of such opportunity being hereby acknowledged, the undersigned hereby releases HHS and its agents, officers, servants and employees, the city of Williamsburg and the county of York of and from any and all liability, claims, demands, actions and causes of action whatsoever, arising out of or related to any loss, damage or injury to the person, or any property of the undersigned, while in, on, or upon the premises, or any premises leased to, owned by, sanctioned by, or while under the control of supervision of HHS, or while in route to or from the premises or any other premises leased to or under the control of supervision of HHS. The undersigned being duly aware of the risks and hazards inherent upon entering upon said premises and/or in participating in any and all aspects of the operations of the HHS at said premises, knowing the current conditions, operations and risks and knowing that these conditions, operations and risks may become more hazardodous and dangerous during the time that the undersigned is upon the said premises, the undersigned hereby voluntarily assumes all risks of loss, damage, or injury, including death, that may be sustained by the undersigned, or any property of the undersigned while in, on, or upon said premises.
The undersigned further releases the HHS from any liability arising from any acts or omissions of its agents, officers, servants, employees and authorized volunteers, wherever such acts or omissions occur.
The release shall be binding upon the distributees, heirs, next of kin, executors, administrators and personal representatives of the undersigned.
In signing the foregoing release, the undersigned hereby acknowledges and represents that she or he has read the release, understands it, and signs it voluntarily; that she or he is over 18 years of age and of sound mind; that she or he is the legal parent or guardian of the following children who are between the age(s) of 10 and 17 and are covered by all provisions of this release (no one under 16 may walk a dog); that she or he is not an agent, servant, or employee of The Heritage Humane Society
In witness whereof, the undersigned has hereunto set her or his hand and certifies that she or he has not bee convicted of animal cruelty or neglect.



Signature: _____ Date: _____

Printed Name: