



Volunteer Application

P.O. Box 2096, Ridgway, CO 81432 | (p) 970.626.2273 | (f) 888.751.0520

Thank you for your interest in the Second Chance Humane Society!! SCHS cherishes all our volunteers for it is you who support our mission of: Saving Animal's Lives and Promoting Responsible Pet Parenting & the Human-Animal Bond. We encourage you to complete this application and schedule an introductory meeting with the Volunteer Coordinator. In this meeting you will be provided with an overview of the various volunteer opportunities available to you and your skills and interests will be matched to fit these opportunities.

Please note that while we greatly appreciate volunteers, please check with the Volunteer Coordinator about volunteer opportunities for individuals under the age of under the age of 16.

Name: _____ Date: _____

Mailing Address: _____ City & State: _____ Zip: _____

Email: _____ Phone: _____

Occupation: _____ Phone (cell): _____

Which volunteer setting(s) are you interested in? Thrift store Animal shelter Events Other
If other, please indicate _____

What date & times are best for you?

- Sunday _____ to _____
- Monday _____ to _____
- Tuesday _____ to _____
- Wednesday _____ to _____
- Thursday _____ to _____
- Friday _____ to _____
- Saturday _____ to _____

What volunteer opportunities interest you the most?

- Cat cuddling & care
- Dog walking & care
- Feral cat program
- Foster care
- Adoption events
- Animal assisted therapy
- Humane education
- Sewing/ crafting
- Fundraisers
- Newsletter
- Public relations
- Graphic design
- Computer work
- Maintenance
- Baking (bake sales)
- Other

Describe any previous related work or volunteer experience:

Please drop off this completed application to the Second Chance Humane Society Shelter or Thrift Shop, or mail to: Volunteer Coordinator, Second Chance Humane Society, PO Box 2096, Ridgway, CO 81432. You may also scan and email to volunteer@adoptmountainpets.org.

I attest that I am 18 years old or older. Parent or guardian signature required otherwise, please.

Volunteer Signature _____

Parent/Guardian Signature _____

Initial Contact Date: _____ Orientation Date: dog: _____ cat: _____ Civi/Memosa Entry: _____



Volunteer Release

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By signing below, I hereby agree to accept a position as a Volunteer for the Second Chance Humane Society (herein after referred to as "SCHS"), and in so doing, I agree to familiarize myself and comply with all of the policies and procedures which may be established from time to time by SCHS. In particular, I fully understand that SCHS expects high standards of moral and ethical treatment of animals in its care. I will adhere to these standards in my capacity as a Volunteer. I understand that SCHS, without notice or hearing, may terminate my services as a Volunteer at any time, with or without reason.

I acknowledge that my services are provided strictly on a volunteer basis, without any pay or compensation of any kind, and without liability of any nature on behalf of SCHS, independent SCHS venues and locations. All services will be performed at my own risk and as a volunteer I am not covered by the insurance or worker's compensation of the organization.

I recognize that in handling animals and performing other volunteer tasks there exists a risk of injury, including physical harm caused by animals. On behalf of myself, my heirs, personal representatives, and executors, I hereby release, discharge, indemnify, and hold harmless SCHS, it's directors, officers, employees, and agents from any and all claims, causes of action, or demands of any nature or cause, whether known or unknown, arising out of or in connection with my Volunteer activities on behalf of SCHS, including but not limited to animal bites, accidents, or injuries. I also acknowledge that I am responsible for all medical bills for any accident or injury that may occur during my volunteer services.

I understand that public relations is an important part of volunteering at SCHS and I hereby allow SCHS to use any photographs of me for public relations purposes.

Signature _____ Date _____

Print Name _____

If you are under the age of 18, we must have your parent or legal guardian's signature.

PARENT OR LEGAL GUARDIAN RELEASE FOR MINORS (under 18 years)

As a parent or legal guardian of the above named volunteer, I hereby give consent for my child or ward, as the case may be, to become a Volunteer for the Second Chance Humane Society as described in the above Volunteer Release Form, and by my signature below, join and agree to be bound by the terms and conditions as described above. **I also understand that any minor under the age of 16 must be accompanied by an adult during volunteer activities.**

Parent/Guardian Signature _____ Date _____

Volunteer Coordinator _____ Date _____