



Volunteer Application

Glynn County Animal Control

YOUR CONTACT INFORMATION

First Name: _____ Last Name: _____ Are you over 18 years old? _____

Address: _____

Phone: _____ E-mail Address: _____

Emergency Contact Name: _____ Relationship: _____

Emergency Contact Phone: _____

YOUR VOLUNTEER INTERESTS

1. Why have you chosen to volunteer with us? Check as many as apply.

Love animals

Help my community

School/club/work service requirement

To use/grow job-related skills

Other: _____

2. What kind of experience do you have with animals? _____

3. Please list any skills, talents, or experience that you have that would benefit the shelter pets:

4. Please check all aspects of volunteering that interest you:

Grooming/Bathing Dogs/Cats Transporting Dogs/Cats Walking/Playing with Dogs

Socializing/Playing with Cats Mobile Adoptions Chores Fostering Cats

Fostering Dogs Humane Education Morning Cleaning

5. Is there anything else you would like us to know?

VOLUNTEER AGREEMENT

- I will abide by the policies and procedures set by Glynn County Animal Control. I will treat all animals respectfully and with care.
- I understand that Animal Control is an open admission facility and though the attempt is made to save as many animals as possible, euthanasia is a necessary part of animal caregiving.
- I will be polite and professional to all staff, other volunteers and the public at all times.
- I will wear a volunteer name tag at all times.

- Should there be any problems with an animal, staff person or the public, I will speak only to a supervisor regarding the issue. I will speak in a positive manner regarding Glynn County Animal Control at all times.
- I will volunteer during the day/time I have committed to and log my hours. In addition, I will do the job I am assigned to and stay in the area I am assigned to.
- I will not use cell phone in front of customers. If phone calls are necessary, I will use it in the back of building as a courtesy to the customers.
- Because my safety is paramount, safety protocols must be adhered to at all times and at all levels; thus, I must have the ability to follow and execute written and verbal instructions from designated immediate supervisors and chain of command.
- I agree to respect the confidential nature of the information I may obtain.
- I understand that my failure to follow the policies and rules of Glynn County Animal Control will result in the termination of my services as a volunteer.

VOLUNTEER WAIVER

1. I, _____ agree to release, discharge, indemnify, and hold harmless Glynn County Animal Control for any and all damage to my personal property while performing my volunteer services at Glynn County Animal Control in a volunteer capacity.
2. I recognize that in handling animals at Glynn County Animal Control while performing my volunteer services, there exists a risk of injury, including personal physical harm. On behalf of myself, my heirs, my personal representatives and executors, I hereby release, discharge, indemnify and hold harmless Glynn County Animal Control, its agents, servants and employees from any and all claims, causes of action or demands, of any nature or cause connected with my Volunteer Agreement. This might include costs and attorney’s fees and court costs incurred by Glynn County Animal Control in connection with my volunteer services based on damages or injuries which might be incurred or sustained but are not limited to animal bites, accidents, injuries and personal property damage.
3. I understand that public relations are an important part of volunteering at Glynn County Animal Control. I therefore agree on behalf of myself, my heirs, my personal representatives and my executors, to allow Glynn County Animal Control to use any photographs taken of me for use in public relations efforts. Glynn County Animal Control will use reasonable efforts to notify me before use, but such notification is not a condition of photographs being released for public relations purposes.
4. I acknowledge that I have read and fully understand the terms and conditions of the foregoing volunteer agreement and release and that I will comply with same.

Volunteer Signature

Date

Volunteer Printed Name

***If you are younger than 18 years old, please fill out our Youth Volunteer Application and have your parent or guardian sign it.**