



Super Heroes Humane Society

697 Winney Hill Rd, Oneonta NY 13820

(607) 441 – 3227

www.superheroeshs.org

info@superheroesirj.org

Volunteer Application

Name: _____

Address: _____

Phone: home (____) _____ cell (____) _____

Email: _____ Best way to contact you: _____

Emergency Contact Name: _____ Phone: _____

Are you over 18 years old? Yes ___ No ___ If not, please list your age. _____

Have you ever owned pets before? ___ cat(s) ___ dog(s) ___ other ___ none

If so, explain your experiences and activities with them.

Areas of Interest

Please check all the jobs listed below that you would be interested in helping with.

<input type="checkbox"/> Answering Phone Messages	<input type="checkbox"/> Night Time Feeding	<input type="checkbox"/> Thrift store
<input type="checkbox"/> Pet transport (Vet Appt's)	<input type="checkbox"/> Kennel work	<input type="checkbox"/> Fundraising events
<input type="checkbox"/> Dog walking	<input type="checkbox"/> Dishes/laundry	<input type="checkbox"/> General Cat Cleaning
<input type="checkbox"/> General Shelter Cleaning	<input type="checkbox"/> Calling Adoption References	

Shift Interest:

9am-12pm: ___ Mon ___ Tue ___ Wed ___ Thu ___ Fri ___ Sat ___ Sun

12pm-3pm: ___ Mon ___ Tue ___ Wed ___ Thu ___ Fri ___ Sat ___ Sun

3pm-5:30pm: ___ Mon ___ Tue ___ Wed ___ Thu ___ Fri ___ Sat ___ Sun



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Volunteer Waiver and Release of Liability

This is a legal document – please read carefully and be sure you understand it before signing.

I, (PRINT NAME HERE) _____, have voluntarily opted to assist Super Heroes Humane Society and/or its affiliates (hereinafter referred to as SHHS) with volunteer work.

By performing this volunteer work, I agree as follows and have initialed each item to indicate that agreement:

___ I am aware that this is a contract between me and SHHS and that it waives legal rights that I may have now or in the future and releases SHHS and others from claims for damages.

___ I AM VOLUNTARILY PARTICIPATING IN THIS ACTIVITY WITH FULL KNOWLEDGE OF THE TASKS INVOLVED. I AGREE TO ACCEPT ANY AND ALL RISKS ASSOCIATED WITH MY PARTICIPATION, INCLUDING BUT NOT LIMITED TO INJURY AND ILLNESS.

___ I understand there are risks and dangers associated with working with wild, feral, and domesticated animals, including but not limited to, bites, scratches, zoonotic diseases (diseases transmitted from animals to humans), and allergic reactions. I also understand there may be risks involved with exposure to certain chemical cleaning products while performing my volunteer duties. I fully understand and accept those risks and dangers.

___ I fully assume all the risks involved with my volunteer activities and acknowledge that they are acceptable to me. I agree to use my best judgment in undertaking these activities. I also agree to follow the rules and safety instructions as given by SHHS employees and volunteers authorized to act in a supervisory capacity.

___ I agree that I will not sue, prosecute, or in any way make a claim against SHHS for injury to me or damage to my property resulting from the negligence or other acts, howsoever caused, by an employee, agent, volunteer or contractor of SHHS or other people as a result of my volunteer duties.

___ I fully and forever release and discharge SHHS from any and all actions, causes of action, claims, liabilities, or demands I have or may have in the future, whether known or unknown, for injury, illness, death or damage arising out of or related in any way to my volunteer duties.

(continued)

___ I agree that SHHS may use my name, and pictures, photographs, or video and/or sound recordings of me on television, on radio, on the internet, in emails, and in stories, news articles, advertisements, or other written or digital materials. I agree that such uses may include education, advocacy, and fund raising. I consent to and authorize, in advance, such use and agree that SHHS does not have to notify me of such use or provide me with other consideration for such use. I waive any rights of privacy and/or publicity I may have in connection with these uses.

___ I agree that the rights I am giving up and agreements I am making apply equally to me and to my heirs, successors, assigns, guardians and legal representatives. I agree that none of those individuals may make any claim or take any action that I could not make or take myself.

___ I agree that this Waiver and Release of Liability protects and is for the benefit of Super Heroes Humane Society, and also for its affiliates, and their respective employees, officers, directors, consultants, interns, volunteers, licensees, and all others acting on their behalf. I also agree that I may not make any claim or take any action against any of those affiliates or individuals that I could not make or take against SHHS itself.

I HAVE CAREFULLY READ THIS WAIVER AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS AND ACCEPT AND SIGN IT OF MY OWN FREE WILL. If I am under 18 years of age at the time of registration, my parent or legal guardian has completely reviewed this Waiver and Release of Liability, understands and consents to its terms, and authorizes my participation.

Printed Name of Volunteer

Signature of Volunteer

Date

Printed Name of Parent or Guardian (if under 18)

Signature of Parent or Guardian (if under 18)

Date

Printed Name of SHHS Representative

Signature of SHHS Representative

Date



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I agree to follow all the Rules and Procedures of Super Heroes Humane Society. I will not hold SHHS responsible for any damage, injury, or harm caused directly or indirectly to any person or property by any pet I may decide to volunteer my time to help.

SHHS, at its sole discretion, reserves the right to refuse any applicant for any reason or no reason.

Applicant's signature: _____

Applicant's printed name: _____

Date: _____

Thank you for your interest in helping! We will get back to you soon! ☺