



**Prattville/Autauga Humane Society**

**Volunteer Application**

First Name	Last Name	Age	E-Mail Address
Address	City	State	Zip
Home Phone	Work Phone	Cell Phone	
Emergency Contact		Emergency Contact Phone	

Why are you interested in becoming a volunteer?

Describe any previous experience working with animals.

Please mark which volunteer opportunities interest you most

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Off-site Fundraising        | <input type="checkbox"/> General shelter assistance | <input type="checkbox"/> Transportation to rescues         |
| <input type="checkbox"/> Education/outreach          | <input type="checkbox"/> Cat Socializer             | <input type="checkbox"/> Trap/Neuter/Release of feral cats |
| <input type="checkbox"/> Foster Parent (min. 2 wks.) | <input type="checkbox"/> A.M. cleaning at shelter   | <input type="checkbox"/> Photography of animals            |
| <input type="checkbox"/> Help with yard work         | <input type="checkbox"/> Bathe and groom animals    | <input type="checkbox"/> Laundry/ dishes                   |
| <input type="checkbox"/> Emergency foster            | <input type="checkbox"/> Dog Socializer/Walker      | <input type="checkbox"/> Event Committee                   |
|  | <input type="checkbox"/> Off-site Adoption events   | <input type="checkbox"/> Other: _____                      |

**Prattville/Autauga Humane Society Volunteer Application – Release**

I, the undersigned, do hereby agree to release the Prattville/Autauga Humane Society, Prattville/Autauga Humane Shelter, the Autauga County Commission or the Mayor and City Council of the City of Prattville, the Prattville/Autauga Humane Society Board, and the Shelter Director from all liability. I will not hold the Prattville/Autauga Humane Society, Prattville/Autauga Humane Shelter, the Autauga County Commission, or the Mayor and City Council of the City of Prattville, the Prattville/Autauga Humane Society Board and the Shelter Director liable for any damage, illness, or injury sustained during volunteer work. I, the undersigned, will never institute any action or lawsuit or inequity against the release the Prattville/Autauga Humane Society, Prattville/Autauga Humane Shelter, the Autauga County Commission or the Mayor and City Council of the City of Prattville, the Prattville/Autauga Humane Society Board, and the Shelter Director nor institute, prosecute or in any way aid, assist, or participate, directly or indirectly, in the institution or prosecution of any claim, demand action, or cause of action for damages, cost, loss of services, expenses or compensation for or on account of any damage loss or injury either to person or property, or both, whether developed or undeveloped, resulting or to result, known or unknown, past, present or future, arising out of the condition or operation of the Prattville/Autauga County Humane Society and its facilities (including but not limited to any damage, loss, or injury either to person or property, or both, resulting from contact with or the actions or conduct of any animal located at or in the custody or control of on in releases, demises, and discharges of the Prattville/Autauga Humane Society). The undersigned volunteer further hereby releases, demises, and discharges the Prattville/Autauga Humane Society, Prattville/Autauga Humane Shelter, the Autauga County Commission or the Mayor and City Council of the City of Prattville, the Prattville/Autauga Humane Society Board, and the Shelter Director, and covenants and agrees to defend, indemnify, and hold the release the Prattville/Autauga Humane Society, Prattville/Autauga Humane Shelter, the Autauga County Commission or the Mayor and City Council of the City of Prattville, the Prattville/Autauga Humane Society Board, and the Shelter Director harmless of and from demands, damages, lawsuits, cost, or expenses said volunteer had or may have for any reason or which may occur or arise by reason volunteer’s association, activity, or work now, heretofore or hereafter at or with the Prattville/Autauga Humane Society.

_____	_____	_____
Volunteer Name (Print)	Volunteer Signature	Date
_____	_____	_____
Parent or Guardian Name (Print)	Parent or Guardian Signature	Date

**\*Volunteers under 17 must be accompanied by a parent or guardian.**

