



Please visit FriendsOfBCAS.org for orientation class details.

BURLINGTON COUNTY ANIMAL SHELTER SHELTER VOLUNTEER APPLICATION AND AGREEMENT

PLEASE ANSWER ALL QUESTIONS AND PRINT/WRITE LEGIBLY.

Applicant Name _____ Date _____

Are you older than age 18? Yes _____ No _____ Sex: [] M [] F

Address _____

City _____ State _____ Zip Code _____

Phone Numbers: (work) _____ (home) _____

Cell #: _____ E-mail address: _____

How did you learn about us? _____

Are you employed? Yes _____ No _____ Occupation: _____

Name of Employer: _____

Address: _____

Do you own a car? No _____ Yes _____ Driver's License no. _____ State: _____

Emergency Contacts:

<u>Name</u>	<u>Tel #</u>	<u>Relationship</u>
1. _____	_____	_____
2. _____	_____	_____

Have you ever been found guilty of a crime? Yes _____ No _____

Do you have health insurance? Yes _____ No _____

Please describe your prior experience with animals (and any dog/cat training you may have had including when, where, training techniques, skills taught): _____

Are you a member of any animal rescue or animal welfare group?

Yes ___ No ___ If "yes", which group(s): _____

Are you computer proficient? Yes _____ No _____ Check applicable:

WORD _____ Word Perfect _____ PowerPoint _____ Excel _____ Other: _____

**BURLINGTON COUNTY ANIMAL SHELTER
SHELTER VOLUNTEER APPLICATION AND AGREEMENT**

Have you owned pets before? Yes_____ No_____

Do you own any pets now? Yes_____ No_____ If yes, then total number of pets? _____

If yes, please give:

<u>Breed</u>	<u>Age</u>	<u>Size(s/m/l)</u>	<u>Behavior</u>	<u>Spayed/Neutered?</u>
-----	-----	-----	-----	Yes _____ No _____
-----	-----	-----	-----	Yes _____ No _____
-----	-----	-----	-----	Yes _____ No _____
-----	-----	-----	-----	Yes _____ No _____
-----	-----	-----	-----	Yes _____ No _____
-----	-----	-----	-----	Yes _____ No _____

If you own pets, please give name and phone number of your veterinary clinic:

Do you have experience as a volunteer? Yes_____ No_____

If "yes" please describe:-----

Do you have experience in dealing with the public? Yes_____ No_____

If "yes" please describe:-----

Do you have any medical conditions or allergies that might limit your volunteer activities?

Yes___ No___ If yes, please explain:

Tell us about your special interests, talents or skills: -----

**BURLINGTON COUNTY ANIMAL SHELTER
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Please provide the following information on two (2) personal references:

<u>Name</u>	<u>Telephone #</u>	<u>Relationship to You</u>

Volunteer hours are: **11:30 AM - 4 PM** (Monday, Tuesday, Wednesday, Friday, Saturday, Sunday) & **11:30 AM - 7 PM** (Thursday). **No volunteers on Holidays.**

My Availability - Tuesday, Wednesday, Friday, Saturday & Sunday: Mornings_____ Afternoons_____

My Availability - Thursday: Mornings_____ Afternoons_____ Evenings_____

Approximately how many hours can you put in per week? _____ (see page 4 for Volunteer Opportunities)

Volunteers must sign in and report to the that day's supervisor or designee prior to volunteering.

I fully understand that this is a volunteer position and that I will not receive any money or other profit for my services. I agree to carry out all training and instruction I receive for my safety and better handling of the animals. I am aware that the animals here are mostly strays and have no history of medical conditions. I enter into this agreement with the Burlington County Animal Shelter freely with the knowledge of the dangers and hazards involved in handling unknown animals. I further relieve the Burlington County Animal Shelter of any and all responsibilities for any injuries, illnesses or hazards I may encounter during my volunteer services.

All volunteers must be 18 years of age or older.

All volunteers must follow policies set forth by the Burlington County Health Department. I have been provided an electronic copy of the Volunteer Handbook. I will read and follow the policies disclosed in the Volunteer Handbook.

SIGNATURE

DATE

**BURLINGTON COUNTY ANIMAL SHELTER
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DESCRIPTION OF VOLUNTEER OPPORTUNITIES

Please check the activities described below that interest you.

- Dog Care- Assist in the socialization of dogs available for adoption by walking them in a specified area. Volunteers are encouraged to interact with dogs by talking, brushing, and playful contact.
- Kennel Assistant- Assist caretakers with duties associated with animal care, cleaning cages, filling water bowls, taking animals out of cages to visit with potential adopters.
- Grooming Assistant- Assist caretakers with the grooming of animals at the Shelter. Duties include bathing animals, clipping nails and other tasks related to the upkeep of an animal.
- Cat Socialization- Assist in the socialization of cats available for adoption by handling, brushing, speaking softly, and playful contact. Duties also include spot cleaning cages, replacing water, and cleaning litter boxes.
- Front Office Assistant- Assist the front office staff with such duties as updating lost-and-found reports, assisting citizens at the counter with questions regarding adoption policies and other animal issues.
- Website maintenance and support - Assist in the posting of Shelter animals on the Shelter website.
- Animal adoption events- Help manage animals brought to adoption events conducted outside of the Shelter.
- Adoption assistance- Interact with members of the public who are considering adoption of an animal. Review the household situation and advise on needs of the animals for the purpose of matching a citizen with a specific animal. Must have good communication skills.
- Develop educational materials.
- Develop promotional events to spotlight the Shelter and the need for adoptive homes.
- Providing foster care of Shelter animals.
- Fundraising for the Shelter
- Other Describe: _____

**BURLINGTON COUNTY ANIMAL SHELTER
SHELTER VOLUNTEER APPLICATION AND AGREEMENT
VOLUNTEER CERTIFICATIONS, ACKNOWLEDGMENTS,
COVENANTS AND AGREEMENTS**

1. I certify that to the best of my knowledge and information I am physically able to perform volunteer services at the Burlington County Animal Shelter. To the best of my knowledge I do not have any communicable disease.
2. I declare that I have never been found guilty or pled guilty to abuse of or cruelty toward any animal or person. No animal that I have ever owned has been declared by a court to be vicious. There is no court restraining order in effect against me.
3. I understand that I will not be considered to be an employee of Burlington County or the Burlington County Animal Shelter. It is my intention to devote my time and services to the Animal Shelter without expectation of compensation in any form.
4. I understand that the County will not provide me with any health or accident insurance. In the event of an accident occurring at the Shelter in which I suffer an injury the County will provide such appropriate emergency medical treatment as it may determine to be necessary but the County will not be liable for the cost of any medical care that I receive privately.
5. I agree to not make any claim or demand or to institute, press or in any way aid any claim, demand, action or causes of action or legal proceeding of any kind against the Burlington County Board of Chosen Freeholders, Burlington County Animal Shelter or Burlington County Health Department for, on account of or in any way growing out of any and all injury I may suffer while providing volunteer services to the County Animal Shelter or that result from my work as a volunteer at the County Animal Shelter that are not caused by or result from the negligence of the County or a County employee.
6. I agree to save and indemnify and keep harmless the Board of Chosen Freeholders of Burlington County, the Burlington County Animal Shelter and the Burlington County Health Department and their servants, officers, agents and employees against all liability, claims and judgments or demands for damages arising from losses or injuries (including death) of persons or property caused by my acts, and I agree to defend any and all suits that may be brought against the County or any of its officers, agents or employees on account of any injury caused by my acts, and will make good to, and reimburse each of them for any expenditures that the County may make by reason of said injury.
7. I hereby consent to be included in promotional material developed and produced by the Friends of the Burlington County Animal Shelter. I understand that my participation is voluntary and I can withdrawal my consent at any time. Promotional material both for marketing and educational purposes, may include photographs and/or digital images, live and still action, and may be used in but not limited to, social media, videos, print media, pamphlets, brochures, newsletters and the like. I hereby waive, release and forever discharge the Burlington County Board of Chosen Freeholders, their officers, representatives, employees, agents, licensees, successors and assigns, from any and all claim, demands or causes of action arising from the use of my photograph and/or digital image for the above purposes.
8. I hereby certify that all of the information provided in this Application is true.
9. I have been advised of the following information:

Zoonotic diseases are transmissible from animals to humans. Zoonotic diseases sometimes found in a shelter environment are Bartonellosis (Cat-Scratch Fever), Brucellosis (Malta fever), Bubonic Plague, Ringworm, Campylobacteriosis, Cryptosporidiosis, External Parasitic Infections (caused by lice, mites & fleas) Giardiasis (Beaver Fever), Leptospirosis (Weil's Disease), Lyme Disease, Nematode (worm) Infections, Pasteurellosis, Rabies, Salmonellosis (Salmonella) and Toxoplasmosis

I understand that the most effective means of preventing zoonosis is to:

- (a) Stay current on appropriate vaccinations, such as tetanus and rabies;
- (b) Wash hands frequently with antibacterial soap, especially after handling any animal and prior to eating or smoking;
- (c) Wear long pants and sturdy closed-toe shoes or boots;
- (d) Use gloves when changing litter pans, washing food and water dishes, or cleaning up feces, urine or vomit;
- (e) Disinfect scratches and bite wounds thoroughly;
- (f) Seek assistance when handling animals whose dispositions are questionable;
- (g) Tell my physician that I work closely with animals, and visit him/her regularly and
- (h) Report any bites or injuries to the Shelter Manager immediately.

**BURLINGTON COUNTY ANIMAL SHELTER
SHELTER VOLUNTEER APPLICATION AND AGREEMENT**

VOLUNTEER AGREEMENT

I agree to comply with the rules, regulations and policies of the Shelter while I am a volunteer.

I recognize that in handling animals at the Shelter in the performance of my volunteer services there is a risk that I might be injured. I accept this risk and take responsibility for myself. My assumption of responsibility includes obtaining, at my cost, a tetanus vaccination and adequate health insurance or resources to pay medical expenses that I might incur if I suffer an injury while volunteering for the Shelter. In particular, I assume the risks of being bitten, scratched, injured or frightened by any and all shelter animals in connection with my volunteer work at the Shelter.

I also understand that animals are euthanized at the Shelter because they might be found to be not suitable for adoption because of temperament or state of health or because of limited space or supplies at the Shelter. I understand that I may witness events or behavior by persons or animals that is disturbing or upsetting.

I understand that the Shelter may suspend or terminate my service as a volunteer for any reason at any time.

I have accurately and truthfully completed this form and agreement. By my signature on this form I authorize the County to investigate the accuracy of the information I have provided and to contact references and my veterinarian.

I understand that the County Shelter strongly encourages all volunteers to make sure that their own animals have all of their vaccinations up-to-date. As an added measure, we suggest that you always change clothes before socializing with your animals at home.

Signature

Date

Witness: -----
Signature

Name (typed/printed)

ADDENDUM #1

**FRIENDS OF THE BURLINGTON COUNTY ANIMAL SHELTER, INC.
(also known as "Friends of BCAS" and "FOBCAS")**

VOLUNTEER AGREEMENT AND LIABILITY WAIVER

I fully understand that this is a volunteer position and that I will not receive any money or other profit for my services. I agree to carry out all training and instruction I receive for my safety and better handling of the animals. I am aware that the animals at the shelter are mostly strays and have no history of medical conditions. I enter into this agreement with Friends of the Burlington County Animal Shelter, Inc. freely with the knowledge of the dangers and hazards involved in handling unknown animals. I further relieve Friends of the Burlington County Animal Shelter, Inc. of any and all responsibilities for any injuries, illnesses or hazards I may encounter during my volunteer services.

I agree to not make any claim or demand or to institute, press or in any way aid any claim, demand, action or causes of action or legal proceeding of any kind against Friends of the Burlington County Animal Shelter, Inc. for, on account of or in any way growing out of any and all injury I may suffer while providing volunteer services for Friends of the Burlington County Animal Shelter, Inc. or that result from my work as a volunteer at the Burlington County Animal Shelter.

I agree to save and indemnify and keep harmless Friends of the Burlington County Animal Shelter, Inc. and their servants, officers, agents and employees against all liability, claims and judgments or demands for damages arising from losses or injuries (including death) of persons or property caused by my acts, and I agree to defend any and all suits that may be brought against Friends of the Burlington County Animal Shelter, Inc. or any of its officers, agents or employees on account of any injury caused by my acts, and will make good to, and reimburse each of them for any expenditures that Friends of the Burlington County Animal Shelter, Inc. may make by reason of said injury.

I hereby consent to be included in promotional material developed and produced by the Friends of the Burlington County Animal Shelter. I understand that my participation is voluntary and I can withdrawal my consent at any time. Promotional material both for marketing and educational purposes, may include photographs and/or digital images, live and still action, and may be used in but not limited to, social media, videos, print media, pamphlets, brochures, newsletters and the like. I hereby waive, release and forever discharge the Friends of the Burlington County Animal Shelter, their servants, officers, agents and employees, from any and all claim, demands or causes of action arising from the use of my photograph and/or digital image for the above purposes.

SIGNATURE

DATE

FRIENDS OF BCAS WITNESS SIGNATURE

DATE