

PRATTVILLE/AUTAUGA HUMANE SOCIETY/SHELTER  
VOLUNTEER APPLICATION AND VOLUNTEER RELEASE AGREEMENT AND  
COVENANT NOT TO SUE

First Name: \_\_\_\_\_ Last Name \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST \_\_\_\_\_

Zip: \_\_\_\_\_ Day phone: \_\_\_\_\_ Evening phone: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Why do you want to volunteer?  
\_\_\_\_\_

If you have previous experience working with animals, please describe: \_\_\_\_\_  
\_\_\_\_\_

List any disabilities or limitations which may affect you ability to perform certain tasks with us:  
\_\_\_\_\_

Please mark the boxes of all areas of interest for volunteer opportunities that you are willing to commit:

OFFSITE Activities:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Adoption Team              | <input type="checkbox"/> Fundraising lead/co-lead      | <input type="checkbox"/> Fundraising           |
| <input type="checkbox"/> News letter                | <input type="checkbox"/> Appear on TV when asked       | <input type="checkbox"/> Run errands           |
| <input type="checkbox"/> Data Entry                 | <input type="checkbox"/> Fundraising support           | <input type="checkbox"/> Maintain database     |
| <input type="checkbox"/> Public Relations           | <input type="checkbox"/> Grant writer                  | <input type="checkbox"/> Volunteer recruitment |
| <input type="checkbox"/> Education/outreach         | <input type="checkbox"/> Project Leader / Chair        | <input type="checkbox"/> Data Entry            |
| <input type="checkbox"/> Administrative             | <input type="checkbox"/> Volunteer coordinator         |  |
| <input type="checkbox"/> Project Co-chair           | <input type="checkbox"/> Webpage design/maintenance    |  |
| <input type="checkbox"/> Foster parent/family       | <input type="checkbox"/> Corporate Membership Director |  |
| <input type="checkbox"/> Appear on radio when asked |  |  |
| <input type="checkbox"/> Other: _____               |  |  |

SHELTER Activities:

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Help with yard work | <input type="checkbox"/> Help clean shelter         | <input type="checkbox"/> Bathe furry friends     |
| <input type="checkbox"/> Socialize dogs/cats | <input type="checkbox"/> Walk furry friends         | <input type="checkbox"/> Help with minor repairs |
| <input type="checkbox"/> Spring cleaning     | <input type="checkbox"/> Summer cleaning            | <input type="checkbox"/> Fall cleaning           |
| <input type="checkbox"/> Winter cleaning     | <input type="checkbox"/> General shelter assistance | <input type="checkbox"/> Grooming                |
| <input type="checkbox"/> Emergency Volunteer | <input type="checkbox"/> Pet Finder Program         | <input type="checkbox"/> Data Entry              |
| <input type="checkbox"/> Other: _____        |   |  |

May we call you occasionally for: \_\_\_\_\_ mailings \_\_\_\_\_ day of event help \_\_\_\_\_ errands

P. O. Box 680697  
Prattville, AL 36068

Ruben Road  
Prattville, AL 36067

334-358-2882  
autaugahumane@yahoo.com

PRATTVILLE/AUTAUGA HUMANE SOCIETY/SHELTER  
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COVENANT NOT TO SUE

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 or 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

\_\_\_\_\_  
Student Volunteer Name (print)

\_\_\_\_\_  
Student Volunteer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Guardian Signature (print)

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

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