



**MANCHESTER
Animal Shelter**

Administration Use Only	
Dates called 1. _____	2. _____
Start Date _____	Area: _____ S NS
Notes: _____	

Volunteer Application

Date: _____ Name: _____ DOB: _____ (must be 18 or older)

Street: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Work: _____

May we contact you at work? _____ If so, during what hours? _____

Employment Position: _____

Email: _____

How did you hear about Volunteering at the Manchester Animal Shelter? (Please indicate all that apply)

Website Shelter Tails TV Show Student Credit Program Other _____

When are you available? Please indicate days and shifts in which you are most interested:

Sunday Monday Tuesday Wednesday Thursdays Friday Saturday

Mornings (8-12) Afternoons(12-4) Evenings(4-8)

Please check the activities that interest you most:

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Dog Care | <input type="checkbox"/> Cat Care | <input type="checkbox"/> Adoption/Reception | <input type="checkbox"/> Fostering |
| <input type="checkbox"/> Special Needs | <input type="checkbox"/> Medical Care | <input type="checkbox"/> Fund Raising | <input type="checkbox"/> Graphic Arts |
| <input type="checkbox"/> Computer Support | <input type="checkbox"/> General Cleaning | <input type="checkbox"/> Grounds Keeping | <input type="checkbox"/> Newsletter |
| <input type="checkbox"/> Shelter Tails TV Show | <input type="checkbox"/> Web Page | <input type="checkbox"/> Grant Writing | <input type="checkbox"/> Public Education |
| <input type="checkbox"/> Event Coordination | <input type="checkbox"/> Adopt-A-Thons | <input type="checkbox"/> Other _____ | |

In case of emergency, who should we notify? For your safety, please list two (2) persons:

1. Name _____ Relationship _____
 Phone number _____ Alternate number _____
 Address _____

2. Name _____ Relationship _____
 Phone number _____ Alternate number _____
 Address _____

The Manchester Animal Shelter seeks to provide a safe and secure heaven for its animal residents. All volunteers need to comply with all its policies and procedures aimed toward maintaining animal health and safety. These policies and procedures are provided in written form to all volunteers and are available at the shelter

Signature _____ Date _____

FMAS Shelter Volunteer Code of Conduct

- I. I, _____, while acting as a volunteer of FMAS, understand that FMAS is dedicated to improving the condition of animals in the Manchester area through education, fundraising, and other means. In an effort to effectuate those purpose, **there are policies and procedures I must follow for the efficient operation of FMAS and for the benefit and protection of individual rights and the shelter animals.**
- II. I acknowledge and accept the following Code of Conduct and understand that my position as a volunteer could be jeopardized if I do not adhere to these standards. I agree that I will not engage in the following conduct:
1. Discourtesy or abusive language or behavior to shelter patrons, other volunteers, shelter management or members of the Board of Directors;
 2. Uncooperativeness with other volunteers, shelter management, or the Board of Directors;
 3. the Negligent or intentional destruction of FMAS property;
 4. Violation of any safety rules or endangering the health or safety of any other person or shelter animal;
 5. Participating as a shelter volunteer while under the influence of alcoholic beverages or illegal drugs.
 6. Involvement in criminal activity that leads to, or has previously resulted in, a criminal conviction.
 7. Appropriate Attire must be worn at all times. (Closed toe shoes, no revealing clothing, preferably an FMAS T-shirt. Please wear name tags at all times.
- III. I understand and acknowledge that inappropriate conduct will result in disciplinary action at the discretion of the shelter management and/or Board of Directors.
- IV. When I am acting in my capacity as a shelter volunteer, I agree to be properly attired. This means at minimum, I will wear a shirt, shorts or pants, and footwear that adequately protect both feet.
- V. I understand and acknowledge the importance of addressing with FMAS management and/or Board of Directors any issues or concerns I may have regarding the policies and procedures of FMAS.

Shelter Volunteer

Date

Authorization of FMAS

Date

Friends of the Manchester Animal Shelter
Volunteer Release of Liability and Hold Harmless Agreement

All persons volunteering at the shelter or participating in any event or activity organized or sponsored, in whole or in part, by the Friends of the Manchester Animal Shelter are required to read, agree to, and sign this waiver before participating in any such event or activity. Please acknowledge that you have read each section by initialing where indicated.

1. Waiver of Liability for Services Performed On Site

I hereby release and forever discharge Manchester Animal Shelter, the City of Manchester, the Friends of the Manchester Animal Shelter, and its employees, volunteers, directors, officers, administrators, agents, and assigns (hereinafter collectively and severally referred to as "FMAS") from all liability for any and all claims, demands, actions, causes of action or suits of any kind whatsoever, and particularly on account of any injuries, to person or property sustained while performing services, voluntary or otherwise, at the Manchester Animal Shelter facility located at 490 Dunbarton Road in Manchester, New Hampshire. **Initial Here:**_____

2. Waiver of Liability for Services Performed Off Site

I hereby release and forever discharge FMAS from all liability for any and all claims, demands, actions, causes of action or suits of any kind whatsoever, and particularly on account of any injuries, to person or property sustained while performing services, voluntary or otherwise, on behalf of, or in conjunction with, FMAS which occurs as a result of participation in any event or activity sponsored or endorsed by FMAS, including, but not limited to, any event or activity promoted in connection with FMAS or its membership program and travels to/from any such event. **Initial Here:**_____

3. Responsibility for Personal Pets and Agreement to Indemnify

I agree that any injury, damage, or loss, of any kind whatsoever, to any person, animal, or property at any FMAS event, or at the Manchester Animal Shelter, caused by my own pet, or a pet which is otherwise in my possession, is solely my responsibility and I will indemnify, save and hold harmless FMAS from any damages, costs, losses and expenses including, but not limited to bodily injury, property damage, including but not limited to legal fees, courts costs, and litigation expenses. **Initial Here:**_____

4. Responsibility to Report Injuries

I agree to immediately report all injuries or disease I may receive while on the property of the Manchester Animal Shelter or while working in the service of FMAS, including but not limited to animal bites, deep scratches, and slips or falls. I agree to file an Incident Report immediately following any such injury. If I am unable to file a written report, I agree to contact the Shelter Manager or Assistant Shelter Manager within 24 hours of the incident and inform them of said incident. **Initial Here:**_____

5. Agreement to Indemnify

I further agree that if, despite this Release of Liability and Hold Harmless Agreement I or anyone on my behalf makes a claim against FMAS, I will indemnify, save and hold harmless FMAS from any damages, losses and expenses including, but not limited to, legal fees, courts costs, and litigation expenses.

I agree to indemnify and hold harmless FMAS from any and all liability, damage, loss, cost and expense incurred as a result of any claim, demand or cause of action brought against FMAS, jointly or individually, for bodily injury, death or property damage suffered as a result of my own negligent, reckless or willful act, omission in the performance or failure to perform his/her volunteer services. (EXAMPLE: a volunteer is drunk driving a FMAS van which then hits and kills a 3rd person. Estate of 3rd person sues FMAS, the signer of this agrees to pay the judgment against FMAS.) **Initial Here:**_____

6. Acknowledgements

Neither this waiver nor the circumstances leading to its execution shall be deemed an acknowledgement by FMAS that, as of the date hereof, any such claim exists or will exist or that the activities and events of FMAS are hazardous or present any unusual risks.

I acknowledge and agree that I: (a) fully understand the meaning of this Release and Waiver and recognize my right to seek the advice of an attorney before signing it; (b) have signed it freely and without any inducement or assurance of any nature; (c) intend it to be a complete unconditional release of liability to the greatest extent allowed by law; and (d) agree that if any portion of this agreement is held to be invalid the balance notwithstanding shall continue in full force and effect. The acceptance of this release shall not operate as an admission of liability on the part of anyone, nor as a waiver or bar with respect to any claim that MAS may have against the undersigned.

This release is binding on my heirs, executors, assigns and administrators. The undersigned is aware of the risks of attending, traveling to and participating in said events or activities and hereby assumes all risks. The risks include those foreseen and unforeseen, known and unknown.

Initial Here: _____

I hereby declare that I am over the age of eighteen (18) years old and that I have read and understood and voluntarily accept the terms and conditions of this Release of Liability and Hold Harmless Agreement.

Signature: _____ **Date:** _____

Print Name: _____

Current Address: _____