

PERSONAL INFORMATION					*Please Note: All volunteers must be 18yrs and older					
Last Name:			First Name:		Student: Date		Date of Bir	th:	Age:	
Address:			City		<i>j</i> :			Postal Code:		
Home Phone:			Other Phone:		Email:					
How would you like to be contacted? () Phone - When is the best time? AM () Email			Occupatio PM		() Ful		() Full-ti	of Work (if applicable): Full-time () Casual Part-time		
Emergency Contact Name:			Emergency Contact Phone		ne: Relation to you:					
VOLUNTEER PROFILE										
Previous volur	nteer experience	Are you applying to perform volunteer work for								
() No	,	() Personal Interest								
() Yes. Where?			School * Please contact the Volunteer Coordinator for information on this program							
		*Please note: We are unable to accommodate court mandated volunteer hours at this								
			time							
Have you beer	referred by so	meone:	Do you have any special skills or training that you believe would benefit the KHS (i.e.							
() Yes – Nai	me·		first aid, event coordination, etc.):							
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AVAILABILITY										
Day	Mon	Tues	Wed	Thu	ırs	Fri	Sat	:	Sun	
	AM	AM	AM	AM		AM	AN	1	AM	
Time	PM	PM	PM	PM		PM	PIV	1	PM	
Mon - Fri AM=11am-12pm PM=12pm-5pm Sat-Sun AM= 10am-12pm PM = 12pm-3pm Please circle your availability									circle your availability	
IVIOII - FIT AIVI-	TTalli-12pili P	M=12pm-5	•	UNTEER OF			ııı-əpiii	riease	circle your availability	
Please check to	he areas that in	terest vou.	101	ONTELN OF	· OKTORII	ilo				
	WITH the anima	-								
Dogs: Cats:				all Animals: Misc.:						
_			uddling	() Fostering () Driving		
() Dog Fostering () Cat/			kitten fosterin	g	() Yard maintenance		
					(y person	
					(ning lost/found pets	
							(() Adoption Ambassador		
Volunteering FOR the animals:										
Administrative: Fundraising: KHS Education:										
() Office assistance			() Fundrais	nce	() Information booths/mall displays					
		() Special		() Humane education						
() Coin boxes										
SPECIAL SKILLS										
() Desktop publishing			() Plum		Other:					
() Electrical				() Painting () Construction						
() Carpentry	1		() Cons	() Construction						

Please Note Due to the high volume of applications, only those applicants whose interests and availability match the needs of the organization will be contacted.



Waiver of Liability for Volunteers

The undersigned acknowledges that he/she will be performing certain volunteer services for the Kingston Humane Society. The undersigned further acknowledges that certain risks may be associated with such volunteer services.

In consideration of being permitted to perform such volunteer services for the Kingston Humane Society, the undersigned voluntarily and knowingly executes this waiver with the express intention of waiving any and all rights or causes of action involving, without limitation, bodily injury, infection or property damage to the undersigned while the undersigned is engaged directly or indirectly, in such volunteer services, whether caused by the negligence of the Kingston Humane Society or its officers, directors, agents or employees.

Further the undersigned shall indemnify, defend and hold harmless the Kingston Humane Society and its agents, officers and employees, jointly or individually, for bodily injury or property damage as a result of the undersigned's services contemplated herein.

Signature of Volunteer	Date							
Protection of Confidentiality								
I have been made a	ware of the confidential nature of information concerning							
animals, donors, personal and other types of Kingston Human	e Society information.							
I have been made aware that confidential information may come to my knowledge through casual conversation or perusal of printed material.								
I agree to exercise all reasonable care and caution in protecting confidential information. When my volunteer commitment has ended I will exercise this same reasonable care and caution in protecting confidential information.								
I also understand that any and all confidential information that may come to my knowledge shall not be released, or spoken by me to any other person(s) without signed authorization from the Kingston Humane Society.								
I understand that violation of these or any other rules and/or conditions to volunteering could be met with dismissal.								
Signature of Volunteer	Date							

Date

Signature Volunteer Coordinator