



14131 Avenue 256, Visalia, CA 93292 • (559) 636-4050 • tcanimalservices@tularecounty.ca.gov • www.tcanimalservices.org

## **VOLUNTEER APPLICATION & AGREEMENT**

Name	Today's Date						
Address	City	Zip					
Phone (H) (Cell)C	Occupation						
Email Address	Do you have transportation?	□ Yes	🗆 No				
Are you over 18 years old? 🛛 Yes 🗌 No	Have you ever been convicted of a felony?	🗆 Yes	🗆 No				
Do you have a health condition or disability that may require speci-	Do you have a health condition or disability that may require special arrangements?						
Why would you like to become a Volunteer?	······						
Please describe any previous volunteer experience you have?							
Do you have training or experience in animal care, animal welfare or been involved in an animal organization?							
Do you have any experience with public relations or customer service? Please describe:							
Do you have any special skills or talents you feel will be beneficial? Please describe:							

WHICH OF THE FOLLOWING VOLUNTEER DUTIES ARE INTERESTED IN?				
Shelter Guide		Education Program		Fund-raising
Offsite Adoption		Adoption Counselor		Animal Exerciser
Animal Care Giver		Special Events		Adoption Follow-up
Animal Grooming		Behavior Training		Other:

WHAT DAYS AND TIMES ARE YOU AVAILABLE?							
	MON	TUES	WED	THUR	FRI	SAT	SUN
MORNING							
AFTERNOON							
EVENING							

## **VOLUNTEER AGREEMENT AND RELEASE FORM**

## Tulare County Animal Services (TCAS) is a proud sponsor of this Volunteer Program.

Please read and sign below:

- I understand that continued participation in the Volunteer Program depends on my cooperation with expectations presented to me and those Policies and Procedures and Terms and Conditions as set forth in the "TCAS Volunteer Handbook".
- If I am unable to abide by the policies and procedures I agree to resign from the volunteer program.
- I agree to be supervised by a TCAS staff member or their designee and will report to my designated contact regarding any issues, concerns, suggestions, complaints, or problems with TCAS staff members and/or other Volunteers.
- I agree to report any injury, inappropriate behavior or poor treatment of animals to the Volunteer Coordinator.
- I agree to keep all records, names of employees, pet owners (previous and new) confidential.
- I agree to allow the County of Tulare to use any photographs taken of me for use in public relations efforts and hold the County of Tulare harmless for any loss or damage to my personal property while performing volunteer services.
- I understand that tending to the safety of foster pet(s) includes never allowing young children unsupervised access to the foster pets, never letting any unrestrained animal near foster pets unless the animal is extremely reliable and preventing all escape routes.
- I agree to indemnify and hold harmless the County of Tulare, Tulare County Animal Services, its officers, agents and employees from and against any and all liability whatsoever arising out of or related to my duties under this agreement or for any negligent act or omission by the County of Tulare, Tulare County Animal Services, its officers, agents and employees.
- I acknowledge that all of the above information is accurate and truthful and that I am 18 years of age or older. *If I am under 18 years of age a parent of guardian must sign below.*

By signing below you agree to comply with the polices of TCAS and the expectations of Volunteer Program.

Signature	Date	Signature of authorized TCAS Representative			
Print Name					
Emergency Contact:		Relation:			
Emergency Phone:	Other				
PARENT/GUARDIAN	SIGNATURE VOLUNTEER	S UNDER 18 YEARS OF AGE			
	nin this Volunteer Agreement and	consent to allow the volunteer to perform services for I Release Form. I acknowledge that I have read and nt and that I will comply with the same.			
Signature of Parent or Guardian (if less than 1	8 years)	Date			
FOR OFFICE USE ONLY					
Interview date:Initials:	Comments:				