

Tehama County Animal Care Center Volunteer Application

Thank you for your interest in the Tehama County Animal Care Center! Volunteers are essential for maintaining the health and happiness of our animals.

To become a volunteer, please complete the Volunteer Application below. Please select the volunteer activities that most interest you. Specifics about each volunteer activity will be discussed further in the orientation meeting. Depending on the activities you choose, additional training may be required.

Na	Name	Date	
	Mailing Address		
Stı	Street Address		
Ci	City State	Zip	
Home Phone		Cell Phone	
En	Email Address		
En	Emergency Contact	Relationship to you	
Co	Contact's Phone Number A	lternate Phone Number	
foi	I will allow Tehama County Animal Services to releas for Tehama Shelter (P.E.T.S), so they might contact volunteer and/or foster. Please initial: YES:	me regarding additional opportunities to	
1.	What is your main motivation for volunteering with us?		
2.	2. How did you hear about our volunteer program?		
3.	Are you able to commit to volunteering 8 hours a month?		
4.	What dates/times are you available to volunteer?		
5.	5. What hours are best to contact you?		

6.	. Have you ever adopted from a shelter or rescue group?						
7.	Do you currently own an	y pets? If so, please list them:	:				
8.	. Are all of your pets spayed or neutered?						
9. Do you have any work history or special training that relates to animal care, train welfare (other than your own)? Please describe:							
10.	10. Please describe any volunteer experience you have:						
11.	One unfortunate aspect of shelter work is to euthanize animals that are unhealthy either behaviorally or medically. What are your thoughts on euthanasia?						
Ple	ease check the volunteer	opportunities you would lik	e to participate in:				
	Dog Socialization	☐ Cat Socialization	☐ Kennel Cleaning/ Maintenance				
	Photography	☐ Fostering*	☐ Groomer				
	Adoption Counseling	☐ Front Office Assistance	☐ Special Events (on/offsite)				
*The in f	nviction of a crime does not ich the fine imposed was sich was finally adjudicated aviction for which the reconstruction for which t	eparate program from the Vole Animal Foster Application. ot necessarily disqualify you on the job requirements. Do not say that the property of the property of the program of the progra	d sealed, expunged, or statutorily				
or o vio rela hav	otherwise discharged and a lations of Health & Safety ated to marijuana. Other the ve you ever been convicted	the case dismissed; e) any converge (Code §11357(b) or (c), §113 and the exceptions noted in the distribution of the court as an offense?	pation has been successfully completed aviction more than 2 years old for 360(b), \$11364, \$11365, or \$11550 as a paragraph above, items A through E,				

Printed Name	Signature	Date
Terms and Conditions		
voluntary capacity as compensation or othe 2. My services are furn	s a volunteer, and without any er payment of any kind whatsoe nished without any employme	ent-type benefits, vacation accrual or
3. I will familiarize mysto Volunteers. In par	ticular, I fully understand that eatment of the animals under it	s compensation. er's policies and procedures applicable the Shelter expects high standards of the care. I will adhere strictly to these
4. I understand that the	•	ring, may terminate my services as a
Release		
shelter may place m personal property. O assigns, I hereby rel Animal Care Center and all claims, cause arising out of, or in c 2. Understanding that p behalf of the Tehama any photographs of n use reasonable effort	e in a hazardous situation and On behalf of myself, and my ease, discharge, indemnify and Shelter and its directors, offices of action and demands of any connection with my Volunteer action with my Volunteer actions are an important County Animal Care Center State in its possession for public re-	Volunteer activities on behalf of the discould result in injury to me or my heirs, personal representatives and dishold harmless the Tehama County cers, employees and agents from any nature, whether known or unknown ctivities on behalf of the Shelter. ant part of Volunteer's activities on Shelter, I hereby authorize them to use elation purposes. I ask that the shelter any such use, but such notification is ations purposes.
Printed Name	Signature	

Tehama County Animal Care Center Staff Signature

Date

If you are under 18 years of age, please have your parent or legal guardian fill out this page.

Parent or Legal Guardian (Of Volunteers 17 Years of Age or Younger)							
consent for my child or w Animal Care Center Shel	rdian of	a volunteer for the Tehama County er Agreement and, by the signature					
Printed Name	Signature	Date					
Parent or Legal Guardi	an Information						
Name		Date					
Mailing Address							
Street Address							
City	State	Zip					
Home Phone	Cell Phor	Cell Phone					
Email Address							