

Youth Volunteer Application

**For Youth Ages 10-13*

Name: _____ Date: _____

Address: _____ Age: _____

City: _____ Prov: _____ Postal Code: _____

Email: _____ Phone: _____

Allergy or Medical Concerns: _____

Can you and your Guardian make a 3-month commitment as a volunteer at this time? Yes No

Guardian Information

Contact Name: _____ Phone: _____

Relationship: _____

I hereby give permission to CA Humane to use my name and photographic/video likeness in all forms and media for humane education, advertising, expo displays, trade and any other lawful purposes.

I wish to receive newsletter emails to keep me informed about the Central Alberta Humane Society and can unsubscribe at any time.

Please note we require all Youth Volunteers and their Guardian to commit to a 3-month volunteer program requiring at least one hour of volunteer per month

If a volunteers guardian changes, please have the past guardian reach out directly to the Volunteer Coordinator. As the new guardian will have to commit to an orientation. No volunteer or guardian may volunteer without an ID tag and the proper orientation. Guardians must always be with their volunteer when volunteering.

When the Youth Volunteer turns 14 please inform the Volunteer Coordinator. They will fill out a new application and can then volunteer without a parent/guardian.

Applicant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Areas of Interest (Check all that Apply)

Cats Cuddling/Pocket Pets Program

- Cat Cuddling (Brushing, petting, interactive playing)
- Small Animal Socialization including Rabbits, Guinea Pigs, Ferrets, etc (petting & interactive playing)

Shelter Assistance **All volunteers are trained on dishes, laundry, and mopping*

- Laundry and Light Janitorial (folding, some mopping, wiping counters and doors, dusting)

Why do you want to volunteer with CA Humane?

List any other organizations you have volunteered for (if any):

OATH OF CONFIDENTIALITY FOR VOLUNTEERS

I understand that during the course volunteer work at the Central Alberta Humane Society I may have access to confidential information about surrenders, emergency boarding, low-income programs, adoptions, and the in-shelter animals. I, therefore, agree to the following:

I have an obligation to maintain the confidentiality of sensitive or competitive information gained in the course of my work and will not use this confidential information to gain financially or to secure privileges or consideration for my own private interests;

I will not engage in any activities that conflict with the interests of or that may adversely affect the reputation of the Central Alberta Humane Society or that may interfere with the fulfillment of my job at the Central Alberta Humane Society;

I will immediately declare to my supervisor any conflict of interest that I become aware of;

I will avoid any arrangement or circumstance, including personal relationships, that may compromise my judgment and my ability as a volunteer to act honestly, in good faith and in the best interest of the Central Alberta Humane Society;

I will adhere to all restrictions on confidentiality, to not take pictures of any animals in the back nor talk about any animals in the back for the safety of animals, staff, and myself. I will not make public statements to the media expressly or impliedly.

Applicant Signature: _____ *Date:* _____

Applicant Name (Printed): _____

Parent/Guardian Signature: _____ *Date:* _____

VOLUNTEER WAIVER FORM

I, the undersigned, agree to indemnify and save harmless the Central Alberta Humane Society, its agents, officers, servants, and employees from any liability which may hereafter be brought against the Society by or on behalf of the undersigned or the undersigned's named infant in respect of any or the foregoing matters hereby released, and acknowledge the risk inherent in the handling of animals, domesticated or wild, and hereby willingly accepts all such risks.

This Release and Indemnity shall be binding to the undersigned, his/her heirs, executors, administrators, and assigns.

Applicant Signature: _____ *Date:* _____

Applicant Name (Printed): _____

Parent/Guardian Signature: _____ *Date:* _____