

# HSMC Volunteer Application & Agreement

HSMC P.O. BOX 168, BELFAIR, WA 98528      (360)275-9310

Thank you for your interest in The Humane Society of Mason County (HSMC). HSMC is 501c non-profit corporation that operates as an animal welfare organization. We need volunteers with a variety of skills.

Volunteer paperwork consists of three components: 1) Volunteer Application 2) Volunteer Agreement and 3) Volunteer Handbook. Please complete and sign the Application and Agreement, and return to the address above. After reviewing your information, our volunteer coordinator will contact you regarding your availability to volunteer, and the activities in which you have expressed interest.

**Your Information:**

Name: \_\_\_\_\_ Today's date \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

Email Address: \_\_\_\_\_ Are you over 18? Yes \_\_\_ No \_\_\_

Emergency Contact: Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Relationship \_\_\_\_\_

**List three references:**

Name: \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name: \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name: \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Do you currently have pets? \_\_\_\_\_ If so, what kind \_\_\_\_\_

**Volunteer Information: List your volunteer experience (past and present).**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have experience or training in any of the following specialized pet related areas? (Please circle)

Training Grooming Vet Assistant Pet Store Sales Animal Behavior Animal Rescue Other-list here

Please give details about your experience: \_\_\_\_\_

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What types of volunteer activities would you like to be involved in? (Please circle)

Volunteer Coordinator Newsletter/Publications Program Development Supplies/Donations Pickups

Trap-Neuter-Return (TNR) Website Update Grooming Arts/Crafts/Sewing Foster Care

Bookkeeping Animal Transporter Board Member/Director Photography Fundraising/Events

Administrative Assisting Building Projects Other

Can you transport animals for medical care, to adoption days and/or to foster homes? \_\_\_\_\_

How many hours are you willing to spend volunteering with HSMC? (Please circle)

Weekly: 2 hours 4 hours 6 hours 8 hours More

Monthly: 2 hours 4 hours 6 hours 8 hours More

Would you like to work on an activity: once a month quarterly Yearly

Which hours and days of the week are you available to volunteer?

In consideration of this opportunity to volunteer, I agree to the following terms and conditions, intending to be legally bound by them:

HSMC mission, rules, regulations, and policies, and agree to abide by them while I am a volunteer.

I understand and agree HSMC may refuse any volunteer application for any reason. It shall be the policy of The Humane Society of Mason County (HSMC) to provide equal membership/employment/service opportunities to all eligible persons without regard to race, religion, color, national origin, citizenship, age, sex, marital status, parental status, handicap, membership in any labor organization, political affiliation, and for employment only, height, weight, and record of arrest without conviction.

\_\_\_By checking here, I certify that above information is true. I give the Humane Society of Mason County representative permission to contact my above references.

Signature\_\_\_\_\_