



Hill Country Animal League

Volunteer Application

Contact Information

Name

Street Address

City, Zip Code

Phone Number

Email Address

Volunteer Tasks Interests

Tell us what areas interest you to serve our organization. Place a check mark by each task you are interested in performing.

Spay / Neuter Clinic

- | | | |
|--------------------------------------------------|-------------------------------------------------|------------------------------------------|
| <input type="checkbox"/> Administrative Support | <input type="checkbox"/> Fundraising/Marketing | <input type="checkbox"/> Surgery Support |
| <input type="checkbox"/> Pet Projects/Education | <input type="checkbox"/> Medical Supply Support | |
| <input type="checkbox"/> Public Relations/Events | <input type="checkbox"/> Animal Care Support | |

Board Committees

- | | | |
|----------------------------------------------------------|------------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Advisory Council Committee | <input type="checkbox"/> Fundraising/Marketing | <input type="checkbox"/> Volunteer Committee |
| <input type="checkbox"/> Budgeting Committee | <input type="checkbox"/> Welfare Committee | |
| <input type="checkbox"/> Marketing/Fundraising Committee | | |

Thrift Stores

Processing

- Sorting Donations
- Tagging Donations
- Shelving Product
- Clothing/Shoes
- Accessories/Linens
- Pricing Jewelry
- Music/Paintings/Books
- Toys/Kids/Games
- Receiving Donations

Floor Operations

- Straightening Floor
- Hanging Clothing
- Assisting Cashiers
- Jewelry Counter Assistant
- Accessories/Linens

Outside Beautification

- General Clean up
- Greens Maintenance
- Receiving Donations

Volunteer Hours Available

Volunteer hours are from 9:00 A.M. to 5:00 P.M. What hours are you available to serve our organization?

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Times Available						

How many days a week are you interested in volunteering?

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired through employment, previous volunteer work or through other activities, including hobbies and sports activities.

Previous Volunteer Experience

Summarize your previous volunteer experience.

Emergency Contact Information

Name	Relationship	Phone Number
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Agreement & Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Printed Name

Signature

Date

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age or disability.

Liability Release & Indemnity Agreement

This liability release and indemnity agreement is entered into by and between the Hill Country Animal League, S.P.C.A. Inc. and their directors, owners, volunteers, agents, contract labor and employees (hereinafter referred to as HCAL) and the undersigned (hereinafter referred to as the Releaser).

Releaser expressly understands and agrees that there is an inherent degree of risk and danger involved in participating in and/or being in the presence of formal and/or informal activities within the HCAL grounds and buildings and at other activities sponsored by HCAL.

The undersigned agrees to release and discharge, HCAL including their directors, volunteers, agents, aids, contract labor and employees, of any and all liability for, but not limited to, bodily injury, death, and property damage which arises out of or during an activity or during the set up or take down phase of an activity within the HCAL grounds, buildings, and/or other sponsored activities.

The undersigned also agrees to indemnify, hold harmless, and defend HCAL, including their directors, volunteers, agents, aids, contract labor and employees, of all and from all losses, costs, damages, and expenses (including court and attorney's fees that arise out of or are connected with bodily injury, death or property damage) which arises out of or that may occur during the preparation for an activity, during the activity and during the take down phase of an activity within the HCAL grounds, buildings, and/or other sponsored activities.

The undersigned, upon the signing of this document, states that he/she has carefully read the forgoing Liability Release and Indemnity Agreement and thereby knows and understands the contents thereof and signs the agreement of his/her own free will and act. The terms and conditions of this Liability Release and Indemnity Agreement are contractual and not a mere recital.

Signature

Date

(If under 18) Parent/Guardian Signature

Thank you for completing this application form and for your interest in volunteering with our organization.