

## Hill Country Animal League Minor Volunteer Consent Form

All minors are any persons under the age of 18 who may volunteer at the Hill Country Animal League (HCAL) Animal Services location or any HCAL events. No volunteers under the age of 18 are permitted to volunteer at the HCAL Thrift Store.

All minors are responsible for:

- 1. Signing the consent form below
- 2. Obtaining parental/guardian signature on form below as proof of parental approval
- 3. Understanding the guidelines of HCAL. It is the responsibility of every parent to ensure that their children understand these guidelines

Any minors without this signed form on file will NOT be permitted to work any events. HCAL holds adoption events where other rescue groups participate. Your signature on this consent form applies to all animals at the event with permission of the animal owner. Minors under the age of 13 must be accompanied by a parent or guardian at all times.

Minors under the age of 13 are permitted to handle animals, only on leash, as long as they are under adult supervision at all times. Circumstances may include but are not limited to: doggy potty breaks, crate cleaning, showing dogs to potential adopters and general doggy playtime. Cats are not to be removed from the cat room or the animals crate if outside the cat room. All minors must walk with the loop of the leash around their wrist and their hand grasping the leash itself at the same time.

HCAL does not knowingly rescue aggressive animals; however, ALL volunteers handling animals do so at their own risk.

Any volunteer who fails to follow the guidelines, procedures or direct requests from the person in charge of the event will no longer be allowed to Volunteer, All volunteers are expected to conduct themselves in a courteous manner with the highest priority being the welfare of the animal.

Volunteer Form: Minor Consent 09.2012



## MINOR VOLUNTEER CONSENT FORM

I, (print name) allow my son or daughte volunteer for Hill Country Animal League. I hereby agree to and fully understar above guidelines and by signing this form, I have given my full consent.	
Name of Minor	
DOB	
Address	
Phone	
Emergency Contact	
Emergency Contact Phone Number	
Signature of Minor	Date
Signature of Parent/Guardian	Date
HCAL Staff Approval Signature	Date