

Green County Humane Society  
1500 6th Ave.  
P.O. Box 54  
Monroe, WI 53566



Phone: (608) 325-9600  
Fax: (608) 325-9608  
shelter@greencountyhumane.org  
www.greencountyhumane.org

Date Received \_\_\_\_\_  
Staff Initials \_\_\_\_\_

## Volunteer Application

- Individual Application
- Family Application *(please list all persons-first & last names)*

### Are you affiliated with any of the following organizations?

- MARS Soccer *(list parent & child participating)*
- Monroe Theatre Guild
- Project World *(list parent & child participating)*
- Community Service Volunteer *(completing a court ordered or extended community service requirement)*
- Other Organization *(please list)* \_\_\_\_\_

*Thank you for considering sharing your time and talents to help our shelter animals. Volunteers provide care and compassion in so many ways. We look forward to working with you and helping you to have a satisfying and rewarding experience. All potential volunteers must complete an application, review the volunteer handbook and sign required forms/releases and a background check if over 18. Volunteers under age 14 must have a parent/adult present to supervise. Volunteers are required to participate in a position specific training by working with a staff member when beginning their volunteer experience.*

### PLEASE PRINT CLEARLY

#### Volunteer Information:

Name(s) of Adult Volunteer (over age 18): \_\_\_\_\_

Name & birth date of any volunteer under the age of 18:

1. First: _____	Last: _____	Birth date _____
2. First: _____	Last: _____	Birth date _____
3. First: _____	Last: _____	Birth date _____
4. First: _____	Last: _____	Birth date _____

E-mail Address: \_\_\_\_\_

*\*E-mail is our preferred method of contact for updates, newsletters, and communication. Please check your junk mail if you have not received an email from us confirming receipt of your application.*

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

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

Phone (home/cell): \_\_\_\_\_ Work: \_\_\_\_\_

Are you currently a member of GCHS? \_\_\_Yes \_\_\_No

If you are not a member, would you like to become a member? \_\_\_Yes \_\_\_No

Name of Emergency Contact: \_\_\_\_\_

Phone number: \_\_\_\_\_ Relationship: \_\_\_\_\_

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**BACKGROUND INFORMATION:**

1. List any additional information or special skills that may be useful: \_\_\_\_\_  
 \_\_\_\_\_
2. Have you volunteered for Green County Humane Society in the past?  Yes  No
3. Are there any medical conditions that could affect your ability to perform certain tasks?  
 Yes  No If yes, please explain: \_\_\_\_\_  
 \_\_\_\_\_
4. Why would you like to volunteer? \_\_\_\_\_  
 \_\_\_\_\_
5. Please describe your pet or animal experiences: \_\_\_\_\_  
 \_\_\_\_\_

**AVAILABILITY:** (mark an "x" in all available time slots. You need not be available for the entire time slot)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
8:00 am-12							
12-2pm							
3-5pm							
5-7pm							

**Frequency:**  Once a Week  Twice a Week  Once a Month Other \_\_\_\_\_  
**Are you able to volunteer on a regular basis (the same time each week)?**  Yes  No  
**How many hours a week can you commit to volunteering at GSHC?** \_\_\_\_\_

**VOLUNTEER POSITIONS:** (please check those positions you would be interested in; most positions require that you are 18 or older; check volunteer handbook for position descriptions)

- |   |   |
|---|---|
| <input type="checkbox"/> Event Volunteer                      | <input type="checkbox"/> Cleaning-Kennels & Cat Cages         |
| <input type="checkbox"/> Canine Companion (minimum age of 13) | <input type="checkbox"/> Animal Photographer                  |
| <input type="checkbox"/> Cat Cuddlers                         | <input type="checkbox"/> Animal Transport (minimum age of 21) |
| <input type="checkbox"/> Animal Groomer                       | <input type="checkbox"/> General Building Cleaning            |
| <input type="checkbox"/> Laundry Helper (minimum age 14)      | <input type="checkbox"/> Grounds Caretaker                    |
| <input type="checkbox"/> SNAP Day Assistant                   | <input type="checkbox"/> Animal Care                          |
| <input type="checkbox"/> Reception Assistant                  | <input type="checkbox"/> Van Detailing (minimum age of 21)    |

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**VOLUNTEER APPLICATION AGREEMENT / RELEASE OF CLAIMS:**  
*(all adults listed on the application must read and sign below)*

- I certify that the statements made in this volunteer application are true and have been given voluntarily.
- I understand that I will not be paid for services as a volunteer.
- In consideration of GCHS accepting my application, or my child's, for participation, I agree to release and hold harmless GCHS, its agents and employees from all actions, causes of action, damages, claims or demands, liability, costs and expenses of any nature whatsoever, including without limitation, attorney's fees and disbursements, arising from or occasioned by my participation in GCHS program which I, my child, our heirs, executors, administrators, or assigns may have against the GCHS, and other above-described parties, for all personal injuries known or unknown which I or my child, have or may incur by participating in the above-described activities.
- I understand there are certain risks/dangers inherent in handling animals and I accept these risks.
- I understand that I am responsible for my minor children (under the age of 18).
- I agree that GCHS may photograph my participation in this program and I hereby release any such photographs to GCHS for use in its programs, publications, public relations, and purpose.
- I understand that it is a violation of privacy and breach of confidentiality to publicly discuss or disclose any information I may learn about any animals, previous owners, or situations.
- I will treat all animals, people, and property while at GCHS with respect and courtesy.
- I will conduct myself with courtesy and respect toward the public, other volunteers and staff at all times.
- The Green County Humane Society has made no representations or promises, in order to sign this release.
- I voluntarily agree to the above mentioned statements. I/we have read this release and understand all its terms. I/we execute it voluntarily and with full knowledge of its significance.

\_\_\_\_\_  
**Your Signature**

*(You must be at least 18 years of age to volunteer without parent/guardian consent. If the volunteer is under 18, parent/guardian must also sign in the space below)*

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Adult Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Adult Signature**

\_\_\_\_\_  
**Date**

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## **DOG WALKING POLICY -**

**The following dog walking policies are a part of the GCHS volunteer policies and apply to all volunteers walking dogs. Anyone walking dogs must sign below:**

- All volunteers under 18 years of age must have parent signature on all volunteer and release forms; before walking any dogs, all forms must be signed and turned in.
- “Solo” dog walkers must be at least 16 year of age or older.
- “Team” dog walkers must be at least 13 years of age (2 people with 1 dog).
- Before walking dogs, all volunteers must check in at the reception desk and sign in.
- Staff will match volunteers with the most appropriate size dog and provide any information regarding that dog.
- Staff members will take dogs from the kennels and bring to the volunteers; **VOLUNTEERS DO NOT GO INTO THE DOG KENNEL AREAS TO GET/RETURN DOGS.**
- “Staff only dogs” may only be walked by staff.

### **While Walking Dogs:**

- Dogs must be on a leash and collar at all times. Be sure to check the collar to make sure it is not loose.
- When walking dogs, do not put your hand through the loop of the leash or wrap around your wrist – this could cause an injury.
- DO NOT walk any dog that is greater than ½ your weight or that you are not comfortable with.
- Only one dog per person is to be walked at any time with the exception of team dog walkers.
- Only one dog should be exiting/entering the kennels at any time. When returning from a walk, wait outside and a staff person will get the dog and bring you another dog. If a dog is coming out of the building, please remain off to the side to give right of way to the dog exiting the building.
- Keep all dogs separated and away from each other when walking. Some of the dogs could be unpredictable or aggressive towards other dogs. (not all dogs get along)
- Before crossing the street, please stop the dogs at the curbside as a part of their ongoing training.
- **All waste must be picked up with plastic bags. Bags are in the entryway near the reception door. Dispose of any fecal waste in the outside dumpster after the walk.**
- Allow at least 15 minutes for a walk; longer walks are encouraged time permitting. Please take time to give them some TLC! The more human contact they have, the more socialized and adoptable they will become.
- If you notice any health concerns or injuries, please be sure to tell the staff member on duty when returning from your walk.

### **Where to Walk:**

- Dogs need some time to walk slowly in greasy areas to give them a chance to eliminate (Do not walk dogs on grassy area near water plant)
- The most common area is the horseshoe shaped area across from the shelter. Do be careful as there are often wild critters that might startle or excite the dog.
- It is permissible to also walk them down the graveled road around the parking lot of Roth Kase warehouse next door, and up 6<sup>th</sup> ave.

Feel free to ask for any information or help that you may need. We greatly appreciate your volunteering to help with the animals at the shelter and we want your time here to be a positive experience. Walking time is the highlight of the dogs’ day and we want it to also be the highlight of your day. However, we get new dogs arriving that may have problems with fearfulness, unpredictability or other problems that are initially unknown. In order to ensure your safety, it is mandatory that you know the dog walking rules and follow all directives of the staff and lead walker.

**I have read, understand and agree to follow all of the above rules.**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Parent’s Signature (if volunteer under 18 years of age)**

\_\_\_\_\_  
**Date**

*Effective 9/2010*