DATE OF APPLICATION\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AGE\*must be 18 yrs or older\_\_\_\_\_\_\_\_\_ DOB\_\_\_\_\_\_\_\_\_\_

ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-MAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DRIVER’S LICENSE # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMERGENCY CONTACT:

NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ RELATIONSHIP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HOME PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ WORK PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CELL PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ HOSPITAL CHOICE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Do you have any allergies that might affect your work at MCHS? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Date of last tetanus inoculation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Attach a copy to application)

\*Do you have any family or friends that work here currently? YES\_\_\_ NO\_\_\_ If so, whom\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is your preferred day/time to volunteer? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Some of our programs require that you use your own vehicle:

Do you have a valid driver’s license? YES NO

Is the vehicle covered by liability insurance? YES NO

Are you willing to transport animals or donations in your vehicle? YES NO

Please number the top three activities below that interest you the most, with #1 being of the highest interest to you.

\_\_\_\_\_\_Clerical Help \_\_\_\_\_\_Community Outreach \_\_\_\_\_\_Special Events

\_\_\_\_\_\_Photography/Videography \_\_\_\_\_\_Walking Dogs \_\_\_\_\_\_Bathing Cats and Dogs \_\_\_\_\_\_Fostering Animals \_\_\_\_\_\_Cleaning Kennels/Dog areas \_\_\_\_\_\_Cleaning Feline areas

How did you hear about the MCHS volunteer program?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What made you interested in volunteering at MCHS?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What special skills, training, or hobbies do you have to offer as a volunteer for MCHS?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How would you like to use these skills to help MCHS through volunteering?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever volunteered before? \_\_\_\_\_\_\_\_ If so, for what organization(s)? What was your role? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you still volunteering there? \_\_\_\_\_\_\_\_\_\_If not, why did you leave the organization? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tell us about any companion animals in your life.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I confirm that all information supplied on this application is true and correct.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



**VOLUNTEER RELEASE FORM**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby agree to accept a position as a volunteer worker for the McCracken County Humane Society, hereinafter referred to as MCHS, and in so doing, I agree to comply with all of the rules and regulations which may be established from time to time by MCHS. I understand that failure to do so may result in my immediate termination as a volunteer.

I acknowledge that my services are provided strictly on a volunteer basis, without any pay or compensation of any kind and without liability of any nature on behalf of MCHS. All services to be performed by me are at my own risk.

I recognize that in handling animals and performing other volunteer tasks there exists a risk of injury including but not limited to physical harm caused by the animals and/or transference of disease by the animals. On behalf of myself, my heirs, personal representatives and executors, I hereby release, discharge, indemnify and hold harmless MCHS, its agents, servants, and employees from any and all claims, causes of action, or demands, of any nature or cause, including costs and attorney fees incurred by MCHS in connection with the same, based on the damage or injuries which may be incurred or sustained by me or any companion animal I may be in contact with in any way connected with my services or as a result of my services for MCHS, including but not limited to animal bites, accidents, disease, or injuries.

DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ VOLUNTEER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, understand that public relations is an important part of volunteering at the McCracken County Humane Society. On behalf of myself, my heirs, personal representatives and executors, I agree that the MCHS may use any photographs, videos, or other images taken of me for use in public relations efforts. I also agree to not post anything on social media pertaining to MCHS animals or procedures without the consent of MCHS management.

DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ VOLUNTEER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

McCracken County Humane Society (known as MCHS) is always looking for compassionate and dedicated volunteers to join our team. We believe that everyone can make an impact on the lives of our shelter animals, whether that is directly or indirectly. See our list of volunteer opportunities.

Don't see your perfect volunteer role on this list?  We will be sure to find an option that fits your schedule and makes the most of your time and talents.

​

HOW TO GET STARTED:

​

Fill out our [online volunteer application](https://www.volgistics.com/ex/portal.dll/ap?ap=615034672)

​

Complete inhouse orientation

​

Complete hands-on training

​

Volunteer and have fun!

​

TIME COMMITMENT:

​

There are no minimum requirements for volunteers. We appreciate any time that individual schedules will allow for.

​

AGE REQUIREMENTS:

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We value all volunteers of all ages. Volunteers under the age of 18 must have a parent or guardian present when volunteering.

​

VOLUNTEER AS A GROUP:

​

If you have an idea for a group volunteer activity or a special request, please email MCHS at info@mccrackenhumane.org. Please be sure toinclude an ideal date, time, and general area of work you would like to help out in.

**​**

COMMUNITY SERVICE:

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If you need to complete community service hours,

please call 270-443-5923.

​

HOW TO HELP OUTSIDE THE SHELTER:

​

If volunteering does not sound like it's for you but you are still looking for ways to help us here at MCHS, check out these other great options!

Wish List: MCHS is always in need of supplies! You can start your own wish list drive for MCHS with your school, friends, or community. You can find our Wish List on our website [www.mccrackenhumane.org](http://www.mccrackenhumane.org) and also on Amazon/AmazonSmile and Chewy.com

ind our wish list here.

 Become a Fan: Like and follow our [Facebook, Instagram](https://www.instagram.com/havenhumanesociety/?hl=en), Twitter, and Tiktok pages, then invite your family and friends to do it too. Like and share posts so they're seen by as many people as possible.

Facebook Fundraisers: Set up a Facebook fundraiser for birthdays or “just because” for your family and friends to participate in.

​

Donate Your Birthday: Request donations for MCHS instead of presents. Refer to our wish list for gift ideas.

​

Spread the Word: Educate your friends and family about the importance of spaying and neutering your pets to prevent overpopulation.

ADDITIONAL QUESTIONS

Contact us at 270-443-5923 or info@mccrackenhumane.org