

Humane Society of Rowan County
PO Box 295 Salisbury, NC 28145
704-636-5700 HSRCNC1973@gmail.com
www.HumaneSocietyOfRowanCountyNC.org
Volunteer Application

Name _____
(Please Print)

Address _____

City _____ Zip _____

Home Phone _____ Work Phone _____

Cell Phone _____ E-Mail _____

Occupation _____ Retired _____ Student _____

Place of Employment/School _____

Interests: Food collection & distribution _____ Foster Care _____ Fundraising _____
Newsletter _____ Posting flyers/information _____ Rescue _____
Returning phone calls _____ Taking pictures of our animals _____
Transporting animals _____ Helping care for our cats at PetSmart _____

Past volunteer experience _____

Days Available Sun ___ Mon ___ Tues ___ Wed ___ Thurs ___ Fri ___ Sat ___
Morning _____ Afternoon _____ Evening _____

Please indicate your commitment: daily _____ weekly _____ monthly _____

(Due to the nature of our efforts, we need some volunteers who are willing to be "on call.")

Emergency Contact _____ Phone _____

As a volunteer, I am working at my own risk. By signing below, I am saying that I will not hold the Humane Society of Rowan County liable in the event of any injury or medical expense that may occur beyond what compensation might be offered by an authorized representative of the Humane Society of Rowan County.

Signature _____ Date _____

I give my permission for _____ (a minor) to volunteer with the Humane Society of Rowan County. If the youth is under 16 years of age, I understand that I or another parent/guardian/parental substitute will accompany the youth to perform volunteer service for the Humane Society of Rowan County.

Signature _____ Date _____