

VOLUNTEER RELEASE

Vermilion Parish Police Jury - Animal Rabies Control

The undersigned volunteer, does/do execute this release, waiver and indemnification, thereby agreeing to forever release Animal Aid for Vermilion Area, the Vermilion Parish Police Jury, its employees, officers, officials, subcontractors, agents and assigns from any and all liability, loss, damage, cost claims and/or causes of action, including but not limited to, all bodily injuries and property damage arising out of my participating in animal transport, rehabilitation, adoption, care, or any other activities. It is specifically understood that the said activities include the handling of animals, exposure to dog and cat dander, dog and cat hair; pet food with preservatives; cleaning chemicals; animal activity; dogs and cats with fleas, ringworms, or any other contagious diseases and other potential hazards. Some lifting and labor may occasionally be asked of volunteers. The undersigned person(s) further agree(s) to indemnify Animal Aid for Vermilion Area, the Vermilion Parish Police Jury, its employees, officers, officials, subcontractors, agents and assigns and hold them harmless for any liability, loss, damage, cost, claim judgment or settlement which may be brought or entered against them as a result of the undersigned person's participation in aforesaid activity. Anyone with immune compromised health issues are not recommended to work hands on with animals or in the shelter, and I hereby declare and certify that I have no such health issues.

Pursuant to the Louisiana State Statute 14:102.1., I certify that I have never been convicted of animal cruelty, neglect or abandonment and will update this statement as required. I will practice all safety rules and ensure that all equipment is in good condition, whether owned, loaned, or borrowed.

This waiver shall remain valid and effective unless expressly revoked by the undersigned volunteer; which express revocation shall be in writing and delivered to the Vermilion Parish Rabies and Animal Control Center; and shall be effective upon delivery.

Signature of Volunteer

Date

VOLUNTEER AGREEMENT

Vermilion Parish Rabies and Animal Control Center

I, the undersigned volunteer, do hereby agree that the services to be performed by me at the Vermilion Parish Rabies and Animal Control Center may require lifting and other manual labor tasks such as bathing and care of the animals, cleaning of the shelter, animal transport or other shelter or adoption related tasks; and that I will comply by the terms, conditions and guidelines of Animal Aid for Vermilion Area, the Vermilion Parish Police Jury, the Vermilion Parish Rabies and Animal Control Center, and its employees and officials in the course of performing these services and tasks.

I further agree that all services and tasks performed at the Vermilion Parish Rabies and Animal control Center shall be performed in full compliance with all federal, state, parish and local laws, regulations and guidelines for such services and tasks. Should my performance of such services or tasks be found in violation of the same, my volunteer agreement shall be terminated immediately upon such finding and notice thereof.

I further agree that I will not hold Animal Aid for Vermilion Area, the Vermilion Parish Police Jury, the Vermilion Parish Rabies and Animal Control Center, or their employees, officers, officials, subcontractors, agents or assigns responsible for any accident or injury during the course, or arising from my volunteer services and activities at the animal shelter.

Volunteer Signature

Date

VPRAC Supervisor

Date

**ANIMAL AID FOR VERMILION AREA
5937 VETERANS MEMORIAL DRIVE
ABBEVILLE, LA 70510
(337) 366-0212**

VOLUNTEER APPLICATION FOR VOLUNTEER PROGRAM AT VPRAC

Animal Aid for Vermilion Area is dedicated to showing companionship to all animals and to educate the public to eliminate the over-population of cats and dogs by spaying and neutering. We always welcome new volunteers and are delighted you are interested in helping with our efforts.

Please take the time to complete this form and return it to the above address. After reviewing your information, our Volunteer Coordinator will contact you regarding your time availability and the activities for which you expressed an interest.

Thank you for your interest in becoming a part of our group.

CONTACT INFORMATION:

First Name: _____ Last Name: _____

Address : _____ City: _____ State: _____ ZIP: _____

Home Phone: (____) _____ Cell Phone: (____) _____ Email: _____

PERSONAL REFERENCES: (no more than 1 family member)

REFERENCE 1

Name: _____ Relationship: _____

Address : _____ City: _____ State: _____ ZIP: _____

Home Phone: (____) _____ Cell Phone: (____) _____

REFERENCE 2

Name: _____ Relationship: _____

Address : _____ City: _____ State: _____ ZIP: _____

Home Phone: (____) _____ Cell Phone: (____) _____

REFERENCE 3

Name: _____ Relationship: _____

Address : _____ City: _____ State: _____ ZIP: _____

Home Phone: () Cell Phone: () _____

PAST EXPERIENCE & TRAINING:

Yes No

Have you ever been bitten or attacked by a dog or cat?

Yes No

Did the bite require medical attention?

Yes No

Are you comfortable approaching a dog or cat you do not know?

Yes No

Do you understand that dogs/cats may be unpredictable and Animal Aid for Vermilion Area cannot guarantee that a dog/cat may not become aggressive?

Yes No

Are you willing to assume the risk involved with working with animals who are sometimes frightened and who are in unfamiliar surroundings and the possibility that the dog/cat may become aggressive and/or bite/scratch you or a companion?

Do you have experience/training in any of the following dog/cat related areas of work?
(check all that apply)

- | | | | |
|-----------------------------------|------------------------------------|---|------------------------------------|
| <input type="checkbox"/> Vet Tech | <input type="checkbox"/> Breeding | <input type="checkbox"/> Kennel Assistant | <input type="checkbox"/> Transport |
| <input type="checkbox"/> Grooming | <input type="checkbox"/> Pet Store | <input type="checkbox"/> Animal Rescue | <input type="checkbox"/> Other |

Do you have other experience/skills that would help you in dog/cat care-taking?

TRANSPORTATION:

If volunteering for transportation, what type of vehicle do you have for transporting animals?

Yes No

Are you willing to accept any risk involved in transporting a dog/cat inside your vehicle?

Yes No

Do you own any crates?

Please describe in your own words why you are interested in volunteering with Animal Aid for Vermilion Area:

EMERGENCY CONTACT INFORMATION:

(In case of emergency, Animal Aid for Vermilion Area will act immediately to contact your

preferences below)

Primary Contact
Phone Number

Relationship
Other Phone Number

PLEASE DO NOT WRITE ON THIS PAGE - THIS SECTION FOR STAFF USE ONLY

Volunteer Accepted

	Date	Time	
<input type="checkbox"/> Orientation scheduled for:	/ /		AM / PM
<input type="checkbox"/> Review policies and procedures:	/ /		AM / PM
<input type="checkbox"/> Training with shelter manager:	/ /		AM / PM
<input type="checkbox"/> Date volunteer can start:	/ /		AM / PM

Remarks: _____

Volunteer NOT Accepted

Reasons:

Remarks: _____

- Service not needed
- Poor history with animals
- Background history
- Over-committed with other activities
- Does not have the temperament
- Safety Issues
- Other: _____

Volunteer Coordinator: _____ Date: _____