

Volunteer Application

GROSSE ILE ANIMAL SHELTER

25799 3rd
734-469-7145



Contact Information

FIRST NAME: _____

LAST NAME: _____

ADDRESS: _____

CITY: _____

STATE: _____

ZIPCODE: _____

PHONE:

CELL: _____ HOME: _____

E-MAIL: _____

BIRTHDATE: _____

Any known allergies, asthma or Physical limitations?:

Do you have a disability that may require accommodations or assistance?:

Last Tetanus Shot:_____

Do you have a Valid driver's license:_____

Have you been convicted of a crime?:_____

**If yes please
explain:_____**

Skills and Experience:

Volunteered at another shelter:_____

**If yes which shelter and how was your
experience:_____**

Vet/Animal Medical:_____

Animal Handling:_____

Fundraising:_____

Photography/Videography:_____

Maintenance/Handy-man:_____

Computer:_____

Why are you interested in volunteering at the Shelter: _____

I am available to volunteer the following hours:

Monday Days: _____ Monday Night: _____
Tuesday Days: _____ Tuesday Night: _____
Wednesday Days: _____ Wednesday Night: _____
Thursday Days: _____ Thursday Night: _____
Friday Days: _____ Friday Night: _____
Saturday Days: _____ Saturday Night: _____
Sunday Days: _____ Sunday Night: _____

**TOWNSHIP OF GROSSE ILE
GROSSE ILE ANIMAL SHELTER**

HOLD HARMLESS BY VOLUNTEER AT ANIMAL SHELTER

The undersigned acknowledges that he/she is a volunteer and is not an employee of the Township of Grosse Ile or the Township of Grosse Ile Police Department. The undersigned understands that as a volunteer he/she is not eligible for any worker's compensation, unemployment compensation or disability benefits because the undersigned is a volunteer.

In consideration of the undersigned being granted permission to work as a volunteer at the Animal Shelter, the undersigned hereby assumes all risk and liability relating to the volunteer services and agrees to hold harmless and indemnify the Township of Grosse Ile, County of Wayne, from all liability or responsibility whatever for injury (including death) to persons or for any damage to any property or to the property of others arising out of or resulting from the volunteer services by the undersigned.

The undersigned further does hereby remise, release and forever discharge the Township of Grosse Ile, County of Wayne, its officers, agents and employees from any and all claims, demands, actions, causes of action, damages and liabilities resulting or arising out of, either directly or indirectly, from the volunteer services at the Animal Shelter.

Date: _____ Witnessed by: _____

Name: _____ Signature: _____

Address: _____

Phone: _____ e-mail: _____

Age: _____

(If less than 18, parent/guardian must sign waiver)

Name: _____ Signature: _____

Relationship to Volunteer: _____

Hold harmless