



Volunteer Application, Agreement and Release

Your Information

Please provide full and complete contact information so our Volunteer Coordinator is able to contact you efficiently.

First Name: _____

Last Name: _____

Title: -Dr. -Mr. -Mrs. -Ms.

Street 1: _____

Street 2: _____

City: _____

State: _____

Zip: _____

Home/Primary
phone: _____

Work phone: _____

Cell/Backup phone: _____

E-Mail: _____

Best Time to Call: -1 - Mornings -2 - Afternoons -3 - Evenings

How Did You Hear
About Clermont Pets
Alive? _____

Emergency Contact Information

We don't anticipate needing to contact someone else on your behalf but it's wise to have it JUST IN CASE.

First Name: _____

Last Name: _____

Home/Primary
phone: _____

Cell/Backup phone: _____

E-Mail: _____

Relationship: _____



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Volunteer Details

Select Opportunities of Interest: -Accounting/Bookkeeping -Adoption

- Animal Records Management
- Bake Sale
- Cat Behavior
- Cat Groomer
- Cat Marketing Photographer
- Cat Marketing Videographer
- Cat Profile & Bio Writer
- Cat Socializing
- Data Entry/Office Work
- Dog Behavior/Training
- Dog Foster Mentor
- Dog Foster Placement Coordinator
- Dog Foster Screener
- Dog Groomer
- Dog Marketing Photographer
- Dog Marketing Videographer
- Dog Profile & Bio Writer
- Dog Socializing
- Donor Recognition
- Events - Adoption
- Events - Outreach
- Facilities
- Faxing Paperwork
- Foster Coordinator
- Fundraising
- Grant Writing
- Graphics Design
- Helpline
- Legal Assistance
- Marketing
- Medical Coordinator
- Neonatal Care
- Newsletter
- Pet Ministry
- Photography
- Public Relations
- Rescue Coordinator
- Shelter Operations
- Social Media
- Telephone Calls
- Trade - Carpentry
- Trade - HVAC
- Trade - Other (Explain)
- Trade - Plumbing
- Transport
- Veterinary Assistance Program
- Video
- Volunteer Coordinator
- Volunteer Management System Support
- Volunteer Recognition
- Web Site/Other Technical Support
- Writing/Editing

Reason for
Volunteering?



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Prior Experience Working with Animals

Please Share
Details:

Your Skills

Please Explain Your
Skills and
Experience:

Availability

Please indicate the days and times you are usually available to volunteer.

I would like to serve
up to:

hours: -Daily -Monthly -One Time -Weekly

Communication Preferences

We like to keep Volunteers informed of important news, schedules, and opportunities, however we will not send you any anything you prefer not to receive. Use the checkboxes below to select the topics you would like to receive from us.

What kinds of email
would you like to
receive?

- Electronic Newsletters
Scheduled communication sharing accomplishments, providing educational material and news of upcoming events, activities and opportunities.
- Recruitment Appeals
Specific requests for your support.
- Animals for Adoption
Networking requests to place animals into forever homes.
- Account Maintenance
Notifications of items required for you to maintain your access to the Clermont Pets Alive! Volunteer Center.
- Your Feedback
Inquiries requesting your input regarding your experience with Clermont Pets Alive!
- Schedule reminders
Notifications of volunteer events or activities for which you have expressed interest.



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Your Approval

I am typing my first and last name in the field below to indicate my acceptance of the terms listed below. This will act as my signature and indicates my agreement to be bound by these terms.

Signature (Type First
and Last Name): _____

Permission to Use
Photos/Video of You:

Are You At Least 18 -No -Yes
Years Old:

Volunteer Agreement

In consideration of this opportunity to volunteer for Clermont Pets Aive! ("CPA!"), I agree to the following terms and conditions:

- I will abide by the mission, rules, regulations, policies and programs of CPA! while I am a volunteer.
- I agree to be supervised by a CPA! Manager or designee and will work as a team member with all volunteers.
- I will treat all animals, other volunteers, and the general public with dignity and respect.
- If I will be sheltering or providing foster care or boarding for any of the CPA! animals in my home, I consent to a CPA! representative visiting my home from time to time to observe the animals and their living quarters.
- I have accurately and truthfully completed this Volunteer Application and Agreement.
- I understand that all CPA! volunteers must be at least 18 years of age or accompanied by a parent or guardian at all times. The parent or guardian must also complete this online application.

I understand and agree that as a volunteer for Clermont Pets Alive! (herein after referred to as "CPA!"), I assume all risks of loss or injury, including death to myself or damage to my property while on the property of CPA! and elsewhere, while participating in the volunteer program.

I understand and agree that all services performed by me will be performed on a strictly voluntary basis, and that I will receive no remuneration, pay or compensation of any kind.

I understand and agree that I will not be an employee of CPA! and will not receive any benefits normally available to employees of CPA!. I understand and agree that CPA! shall incur no liability of any nature as result of my volunteering for CPA!.

I understand that in handling animals and performing other volunteer tasks there is a risk of injury, including physical harm or death, and that all services performed by me will be done at my own risk. I understand CPA! strongly recommends that I keep current my tetanus immunization. I further understand that CPA! recommends that any dogs and cats that I live with should be immunized by my veterinarian, if not already done so.

Therefore, on behalf of myself, my heirs and personal representatives, I hereby release, discharge and indemnify and hold harmless CPA! and its assigns, successors, agents, staff, officers, board of directors, employees, contractors and representatives from any and all claims, causes of action or demands of any nature of cause whatsoever, including costs and legal fees arising out of, or relating to, my volunteering with CPA!, including, but not limited to, animal bites, disease, accidents, property damage, or injuries.

I Agree

Fax Completed Form to: 877-204-4863

Email Completed Form to: Adoptions@ClermontPetsAlive.org

Mail Completed Form to:
Clermont Pets Alive!
1250 W. Ohio Pike, Suite 201
Amelia, OH 45102

We Request Your Patience to Process Your Application Offline - Thank You.