



## Volunteer Application

**VOLUNTEERS UNDER AGE 18 MUST HAVE PARENT/GUARDIAN CONSENT. VOLUNTEERS 14 AND UNDER MUST BE ACCOMPANIED BY AN ADULT (18 and older). VOLUNTEERS 15 AND OLDER MAY VOLUNTEER WITHOUT AN ADULT PRESENT.**

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Prior Volunteer Experience? \_\_\_\_ Yes \_\_\_\_ No If yes, where \_\_\_\_\_

Have you ever been arrested and/or convicted of a felony? \_\_\_\_\_

Talents/training/education you have that might help EAS \_\_\_\_\_

Do you have any physical limitations or medical conditions it would be important for us to know? If yes, please explain \_\_\_\_\_

**Please note: To play with any animal unsupervised you must be 18 years of age or older and you must have permission of a shelter employee. No one may take a dog from the kennel without the permission of a shelter employee.**

**Volunteers must be able to react quickly and rationally, as animals can sometimes be very unpredictable. Volunteers who work with animals must have the ability to restrain the animals for their own safety, the safety of others and the safety of the animals. EAS reserves the right to place volunteers in areas best suited to their abilities and restrictions, and to reject volunteers whose participation at events or programs sponsored by EAS could potentially place the participant, the animals or other individuals at risk of harm.**

**If any equipment or property is lost/damage and I am at fault, I agree to replace that equipment or property or to reimburse Edgewater Animal Shelter for its value.**

**I hereby authorize Edgewater Animal Shelter to conduct a background investigation of me if required.**

**I hereby agree to a physical examination (including testing for illegal drugs, controlled substances or alcohol) if necessary, at any time prior to or during my time as a volunteer. Such testing would be based on Federal, State, County, or City regulations.**

## HOLD HARMLESS AGREEMENT

I hereby acknowledge that there are inherent risks, including hidden risks, and including risks of serious bodily injury or death, involved with the volunteer work for which I am volunteering. I believe that I am physically and mentally capable of performing that volunteer work and I am knowingly and volunteering assuming all such risks by volunteering.

I hereby agree to indemnify and to save and hold harmless a Florida non-for-profit Edgewater Animal Shelter Inc., at 605 Mango Tree Dr, Edgewater FL 32132-2059, and its elected officials, officers, employees, agents and instrumentalities (the indemnified parties), from any and all claims, liabilities, demands, suits, causes of action, proceedings or judgements of any kind or nature, losses or damages including attorney's fees and costs for defense, which I may have now or in the future arising out of or caused by my volunteering or volunteer work, whether the result of negligence, error, omission, intentional acts or omissions of the indemnified parties. I further agree that this Hold Harmless Agreement shall apply in the event that I am temporarily or permanently injured or disabled or incur temporary or permanent disease or am killed as a result of or in the course of my volunteering or volunteer work. I agree to pay all claims, liabilities, demands, judgements and losses in connection with any of the foregoing and to investigate and defend all claims, demands, suits, causes of action, proceedings or actions of any kind or nature, including appellate proceedings, in the name of the applicable indemnified party, and to pay all judgements, costs, and attorney's fees which may issue thereon. This agreement, and its underlying obligations, shall be construed under Florida law. I further agree not to contest jurisdiction or venue in any court situated in Volusia County, Florida. **I hereby certify that the information on this application is true and complete to the best of my knowledge and belief. I acknowledge that I have read this Application and the Hold Harmless Agreement, that I understand them fully, and that I agree to all their terms and conditions.**

Volunteer's Printed Name \_\_\_\_\_

Volunteer's Signature \_\_\_\_\_ Date \_\_\_\_\_

**PARENTAL CONSENT AND WAIVER:** I am the parent or legal guardian of the above \_\_\_\_\_, who is under 18 years of age and I hereby consent and agree to this Hold Harmless Agreement in every respect.

Printed name of Parent/Legal Guardian \_\_\_\_\_

Signature of Parent/Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_