

Tri-County Animal Rescue Center

How Do I Volunteer? The Tri-County ARC values its Volunteers tremendously. Without our Volunteers, the Center would not function.

Step to Becoming a Volunteer.

Complete and return the Volunteer Application. The Application may be mailed or dropped off during regular adoption hours. If mailed, please send to the **Tri-County Animal Rescue Center, [9562 Route 322, Shippenville, PA 16258](#)**.

Thank you for contacting us. We look forward to working with you to make the world a more humane place for all animals.

Today's Date (MM/DD/YYYY): _____

Volunteer Profile

Name:	Date of birth (MM/DD/YYYY):
Street Address:	E-mail address:
City, State, Zip:	Home telephone:
Daytime telephone:	Work telephone:
If you are here through a volunteer program, please indicate the following:	
Agency:	Address:
Name of Contact Person:	Telephone:

Why do you want to volunteer with the Tri-County Animal Rescue Center?

Tri-County Animal Rescue Center

Skills and Experience

Have you had any formal education/training in pet care or animal welfare?

Where: _____ When: _____ Type of education/training: _____

Have you done any other volunteer work?

Where: _____ When: _____ Type of work performed: _____

Areas of interest:

Please check all that apply.

- Canine care
 Feline care
 Marketing
 Fundraising
 Foster care
 Feral cat care
 Medical care
 Other (Please specify) _____

Do you know any Tri-County ARC volunteers? Name(s): _____

Relationship: _____

Have you adopted an animal from Tri-County ARC? Yes No *If yes, who did you adopt and when?*

Are you a member of any other animal welfare organization? Yes No *If yes, how do you participate?*

Availability:

Please circle the days and fill in the times you are available for volunteer work:

Sun	Mon	Tues	Wed	Thurs	Fri	Sat

Miscellaneous:

Do you have any allergies or conditions that might affect your volunteer work? Yes No *If so, please describe.*

Do you have a valid driver's license? Yes No

Please list two personal or business references:

Name:	Relationship:
Daytime telephone:	Evening telephone:
Name:	Relationship:
Daytime Telephone:	Evening Telephone:

Please list a contact in case of an emergency:

Name:	Relationship:
Daytime telephone:	Evening telephone:

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Volunteer Agreement

If accepted as a Tri-County ARC volunteer, you will be required to abide by the terms of our Volunteer Agreement. The agreement below details what Tri-County ARC will expect of you and what you can expect from Tri-County ARC.

If accepted as a Tri-County ARC volunteer, my signature below indicates that I have read, understand, and agree to the following:

- I will treat all animals and other volunteers with respect and I will work as a team member with all volunteers.
- I will abide by all Tri-County ARC policies and procedures and follow the directions/instructions of the Tri-County ARC staff.
- I agree to be supervised by the appropriate Staff and will report any problems that arise directly to the Volunteer Coordinator.
- I understand the possible risk of bringing home illnesses from the Shelter to personal pets or vice versa and must have current vaccinations for animals at home.
- I understand the potential safety risks of working with animals and that I may not bring friends or relatives with me while working at the shelter facility.
- I authorize Tri-County ARC to seek emergency medical treatment for me in case of accident, injury, or illness.
- I agree to indemnify and hold harmless Tri-County ARC, its Board of Directors, officers, agents, and employees from and against any and all liability whatsoever arising out of or related to my duties under this agreement or for any negligent act or omission by Tri-County ARC, its Board of Directors, officers, agents, and employees.
- If I fail to abide by the terms of this Agreement or am otherwise unable to meet the requirements of the volunteer program, which are subject to change by Tri-County ARC from time to time, I understand that I will be terminated from the program. I also understand that I may at any time be removed from my position as a volunteer at the sole discretion of the Volunteer Coordinator.

Signature

Parent Signature
(If under 18)