





3101 E. Stone Drive  
Kingsport, TN 37660  
423-247-1671  
www.petworkstn.com

**Have you ever been convicted of a crime?** [If yes, please explain the nature of the crime and the date of the conviction]  
Conviction of a crime is NOT an automatic disqualification for volunteer work.

**What type of volunteer/community service do you wish to perform?**

Personal Interest      School/Class Requirement      Court/Judiciary Required Service      Other (please explain)

**Medical Information**

Do you have any medical conditions that could prevent you from performing some volunteer duties or that we need to be aware of in the event of an emergency? If so, please explain.

Do you have any allergies to latex or cleaning products (such as bleach)?

Do you have any allergies to cats or dogs?

Please list any allergies to medications.

**Emergency Contacts**

1. \_\_\_\_\_  
**Name:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

2. \_\_\_\_\_  
**Name:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

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**I understand and agree** that submitting this application form does not automatically register me as a Petworks volunteer, and that there may be certain qualifications I must meet, including the acceptance of established volunteer policies and procedures before I may begin volunteering.

**By signing below, I am also giving Petworks the right to take and use photos/videos taken during the day's activities for promotional purposes.**

**By signing this form, I attest that the information I have provided on the form is true and accurate.**

\_\_\_\_\_  
**VOLUNTEER Print Name**                      **VOLUNTEER Signature**                      **Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

*(If under 18, a parent/guardian must sign this document and fill out a Minor Waiver Form. If under 16, volunteer must be accompanied by a parent/guardian at all times.)*

\_\_\_\_\_  
**PARENT Print Name**                      **PARENT Signature**                      **Date** \_\_\_\_/\_\_\_\_/\_\_\_\_



### Volunteer Agreement

Petworks Animal Services and the volunteer worker whose name appears on the signature line below agree to the following terms:

- 1) I will abide by the mission, rules, regulations, policies, procedures and programs of Petworks Animal Services.
- 2) I understand that volunteering with animals exposes me to a risk of rabies infection and other possible illnesses and that the Petworks Animal Services recommends that I discuss a pre- exposure rabies vaccination with my personal physician, at my expense.
- 3) I understand and assume the risk of being bitten, scratched or injured in connection with my volunteer work, and agree to release and waive all possible claims including legal and medical claims arising from my volunteer work at the Petworks Animal Services.
- 4) If I stop being a volunteer, or upon request of the Petworks Animal Services, I will promptly return any property belonging to Petworks including animals, all supplies, equipment, records, manuals, and other items in good clean condition.
- 5) I understand **that my work is voluntary**, and that Petworks Animal Services is not liable to me for any injuries, illness, damages, liabilities, losses, judgment cost or expenses whatsoever, which I might suffer or sustain in connection with my volunteer activities.  
I will indemnify, defend, and hold Petworks Animal Services and its officers, directors, employees, affiliates, or agents from any and all liability or other claims, lawsuits, injuries, damages, losses, cost or expenses whatsoever, sustained by any animal or person in connection with my intentional misconduct or grossly negligent performance of my volunteer activities or my breach of Petworks Animal Services rules, regulations, policies or programs.
- 6) I have accurately and truthfully completed this volunteer application and agreement.
- 7) I understand that Petworks Animal Services may refuse or cancel volunteer applications at their discretion.

\_\_\_\_\_  
**Volunteer Name (PRINT)**

\_\_\_\_\_  
**Volunteer Signature**

\_\_\_\_\_  
**Date**

**\*\* If under 18, a parent/guardian must sign this document. If under 16, volunteer must be accompanied by a parent/guardian at all times.**

\_\_\_\_\_  
**Parent Name (PRINT)**

\_\_\_\_\_  
**Parent Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Shelter Director / Executive Director  
(PRINT NAME)**

\_\_\_\_\_  
**Director Signature**

\_\_\_\_\_  
**Date**