



Everett Animal Services Volunteer Agreement

This agreement demonstrates the respect with which we treat our volunteer program, and the commitment you are making by volunteering at the Everett Animal Shelter.

You and the Everett Animal Shelter agree as follows:

A. Organization

EAS accepts the services of this volunteer, and in our commitment to the volunteer, agrees to do the following:

- We will explain our mission and policies and provide Orientation training, Behind the Front Desk training, Canine or Feline training with long standing volunteers, volunteer education classes, workshops and on-the-job training as necessary. We will also provide written manuals and instructions on EAS procedures.
- Treat the volunteer as a valued EAS team member.
- Provide feedback on the volunteer's performance and provide opportunities for the volunteer to give us feedback so that we might better accomplish our tasks.
- Be available to the volunteer and willing to discuss issues of concern to the volunteer, either in an impromptu discussion or by arranging a specific meeting time.

B. Volunteer

I, _____, am aware that the commitment level required to volunteer at the Everett Animal Shelter (EAS) is high, and I willingly take on this responsibility and agree to the following:

___ I will read all manuals and written instruction provided to me, the volunteer information board and any email or print newsletters I receive, and I will follow instructions given to me.

___ I will work my scheduled shift every week for a minimum of three months and I may continue to do so indefinitely after that period.

___ I am responsible for the shift I choose, and I will make a reasonable attempt to find a replacement to work for me if necessary.

___ I will comply with the EAS volunteer attendance policy, which states that more than three 'call-ins' (un-replaced absences with prior notification to the Shelter Activities Coordinator) or one 'no-show' (un-replaced absence with no prior notification) may result in the termination of my volunteer services.

___ If a last minute emergency prevents me from working my shift and I am unable to find a replacement, I will notify the Activities Coordinator by phone or email as soon as possible.

___ If the shift I chose becomes unworkable for me, I will contact the Activities Coordinator, prior to any un-replaced absences, in an attempt to transfer to another shift.

___ If, at any point, I decide to stop volunteering at EAS or would like to switch to another shift, I will give the Activities Coordinator one month's notice, unless reasonable circumstances prevent this.

___ I will communicate with the Activities Coordinator about any concerns I have regarding my volunteer work.

___ I will conduct myself in a responsible and professional manner whenever providing EAS volunteer services, especially when interacting with the public. I will defer to a staff member if I encounter a question I cannot answer.

___ I know that there are certain risks involved in working with animals, including but not limited to, bites, scratches, zoonotic diseases and allergic reactions. I know there may also be risks involved with exposure to certain cleaning products while performing my duties at the EAS.

___ I will follow the safety procedures outlined in the volunteer manual and presented to me during training. This includes, but is not limited to, practicing safe animal handling and reporting any animal-related injury to staff immediately. I am responsible for sharing any concerns about the safety or adoptability of a particular animal with a staff person or manager immediately.

___ If I am injured while acting as an unpaid member of the volunteer staff, I am not covered by the Washington State Worker's Compensation Law. I authorize the shelter to seek emergency medical treatment for me in the case of an accident, injury or illness at my expense.

___ EAS may use photographs or video footage of my volunteer activities to benefit the volunteer program or the shelter without further notice or consideration.

___ I may gain access to information about the EAS, customers or staff that is confidential, and I agree to maintain that confidentiality and will refuse to disclose any confidential information or any information that may appear private or personal.

___ Failure to comply with this agreement may result in the termination of your volunteer service.

___ I will follow the guidelines outlined in the EAS Workplace Culture Agreement.

___ I have completed the attached volunteer worker application.

Volunteer Signature: _____ Date: _____

Print Name: _____

Parent or Guardian signature (if under 18) _____

EAS Representative: _____ Date: _____

Everett Animal Shelter Volunteer Driving Policy

Washington State Law requires that all automobile drivers be licensed and insured. Any volunteer driving his/her own vehicle in any shelter capacity (i.e. animal transport, etc) must carry a valid driver's license and current automobile insurance. Please read through, sign and date the following, if applicable. If you do not sign, please be aware that you are not authorized to drive for EAS in any capacity.

As a volunteer of the Everett Animal Shelter, I understand that I must have a valid driver's license and current automobile insurance to drive any vehicle while on EAS business. I hereby certify that I do have a valid driver's license and am legally insured to drive in the State of Washington. If my driving or insurance status changes in any way, I agree to notify the Shelter Activities Coordinator immediately.

Signed: _____ Date: _____

Please Print Name: _____



Volunteer Agreement – Group Project

As a special event or offsite volunteer, I agree to:

- Arrive promptly for my volunteer event shift and to work the complete event shift.
- Wear a name tag, volunteer t-shirt and/or appropriate attire at all times when representing Homeward Pet Adoption Center.
- Not bring visitors to my shift unless given permission in advance by the Volunteer Manager.
- Not bring pets to my shift.
- Communicate with the Volunteer Manager about any concerns that I have about my volunteer work. I will report any injury or unsafe condition I may observe or experience while volunteering.
- Have a current Tetanus shot.
- Refer all questions regarding the animals to a staff member and will follow all safety rules and procedures.
- Agree that my picture, including video or live broadcast, may be taken during the course of my volunteer work. I give permission to Homeward Pet Adoption Center to utilize any pictures or video taken for use in Homeward Pet Adoption Center's advertising or promotion to the public.
- Conduct myself in a responsible and professional manner, and to fully represent Homeward Pet Adoption Center's policies when interacting with the public and deferring to a staff member if I ever encounter questions I cannot answer.
- Certify that I will keep confidential information about the public, adopters, staff or volunteers I may come to learn in the course of my duties as a volunteer.
- Acknowledge that there are certain risks involved with working animals, including but not limited to bites, scratches, zoonotic disease and allergic reactions. I am also aware that there may be risks involving the use of certain cleaning products while performing my volunteer duties. I will observe all Homeward Pet Adoption Center safety procedures and abide by the strict cleaning procedures.
- Certify that I am volunteering at Homeward Pet Adoption Center of my own free will and take any risks involved knowingly and by choice. I will not hold Homeward Pet Adoption Center, its employees, board of directors or agents, responsible in any way for any injury to myself while performing my volunteer duties at Homeward Pet Adoption Center.
- Understand Homeward Pet Adoption Center reserves the right to release me from my volunteer activities at any time.

Printed Name _____

Signature _____ Date _____

Parent/Guardian Printed Name _____

Parent/Guardian Signature _____ Date _____



Homeward Pet Adoption Center Volunteer Agreement

I understand and agree that submitting this application form does not automatically register me as a Homeward Pet Adoption Center volunteer. There may be certain qualifications I must meet, including the acceptance of established volunteer policies and procedures, to become an official volunteer.

By submitting this form, I attest that the information I have provided on the form is true and accurate. As a volunteer, I agree to:

- **Work a regular 2 to 3 hour shift** each week with a minimum of 3 full months. I will give the Volunteer Manager advanced notice if I am unable to make a shift. I agree to arrive promptly for my volunteer shift and to work the complete shift.
- **Wear a name tag, volunteer t-shirt** and appropriate attire, as defined in the Volunteer Handbook, at all times when I am at Homeward Pet Adoption Center.
- **Give two week's notice** when I wish to cancel my volunteer service.
- **Not bring visitors to my shift unless given permission in advance** by the Volunteer Manager.
- **Not bring pets to my shift.**
- **Read all communications from the Volunteer Manager, including the Volunteer Handbook,** and attend occasional volunteer meetings and training sessions.
- **Communicate with the Volunteer Manager** about any concerns that I have about my volunteer work. I will report any injury or unsafe condition I may observe or experience while volunteering.
- **Have a current Tetanus shot.**
- **Refer all questions regarding the animals to a staff member and will follow all safety rules and procedures.**
- **Agree that my picture, including video or live broadcast, may be taken during the course of my volunteer work.** I give permission to Homeward Pet Adoption Center to utilize any pictures or video taken for use in **Homeward Pet Adoption Center's advertising or promotion** to the public.
- **Conduct myself in a responsible and professional manner, and to fully represent Homeward Pet Adoption Center's policies when interacting with the public and deferring to a staff member** if I ever encounter questions I cannot answer.
- **Certify that I will keep confidential information about the public, adopters, staff or volunteers** I may come to learn in the course of my duties as a volunteer.

• **Acknowledge that there are certain risks** involved with working animals, including but not limited to bites, scratches, zoonotic disease and allergic reactions. I am also aware that there may be risks involving the use of certain cleaning products while performing my volunteer duties. I will observe all Homeward Pet Adoption Center safety procedures and abide by the strict cleaning procedures.

• **Certify that I am volunteering at Homeward Pet Adoption Center of my own free will and** take any risks involved knowingly and by choice. I will not hold Homeward Pet Adoption Center, its employees, board of directors or agents, responsible in any way for any injury to myself while performing my volunteer duties at Homeward Pet Adoption Center.

• **Understand Homeward Pet Adoption Center reserves the right** to release me from my volunteer activities at any time.

Volunteer Printed Name

Volunteer Signature

Date

Volunteer's Parent or Guardian Printed Name

Volunteer Parent or Guardian Signature

Date

SAMPLE CONFIDENTIALITY AGREEMENT

There are important restrictions on the release of client and employee information and records. These restrictions are for the protection of the shelter's voluntary or involuntary clients, visitors and staff.

Confidential client information should never be discussed with or in the presence of third parties without the approval of a shelter manager. A shelter manager must approve the release of any confidential information or files or documents containing confidential information.

Confidential information includes, but is not limited to, the following:

1. Identifying information about voluntary or involuntary clients, including names, addresses or phone numbers;
2. Identifying information about volunteers and staff including names, addresses or phone numbers;
3. Information relating to families of clients;
4. Identifying information regarding individuals charged with, cited for, or convicted of animal cruelty or neglect.
5. Any other information that would identify clients or potentially place clients and/or family members at risk
6. Information that would identify the names or locations of adopters, adopted animals, fosters, or fostered animals.

All information and records obtained in the course of providing services to either voluntary or involuntary clients or shelter visitors shall be strictly confidential. Staff information cannot be dispensed without the individual's permission.

A breach of confidentiality is a serious infraction of shelter policy and will result in termination of your participation in the volunteer program.

PLEDGE OF CONFIDENTIALITY:

I hereby certify by my signature that I will not give information about shelter clients (voluntary or involuntary), visitors, staff or volunteers to unauthorized persons. I understand that doing so would be a serious violation of agency policy and will result in the termination of my participation in the volunteer program.

I, _____ (print name), have read the above the shelter's confidentiality agreement and understand its terms and my responsibilities as a volunteer.

Signature of Staff or Volunteer

Signature of Supervisor

Date

