



Humane Society of North Iowa
 2700 South Birch Drive
 Mason City, IA 50401
 641-423-6241
 www.hsni.org

Volunteer Form

Name: _____
 (One adult name per form please)

If volunteering as a family, please list children's full names: _____

Address: _____

City, State, Zip: _____

E-mail: _____ **Phone:** _____

In case of emergency, please notify: _____ Phone: _____

Which category do you fit in? Please check the appropriate box:

- _____ Under the age of 16: can volunteer with a parent/guardian (must sign below) or an adult over the age of 18.
- _____ Ages 16 and 17: can volunteer unsupervised with parental consent and signature.
- _____ Over the age of 18: can volunteer with no restrictions; sign form below.

As a volunteer of the Humane Society of North Iowa, I acknowledge and understand that in working directly with animals as I desire, it may subject me to animal misbehavior such as biting, scratching, or other injury to me. As a volunteer, I agree to assume these risks. Also, I agree to be responsible for any rabies, tetanus, or other diseases or maladies which may arise from my working with the animals at the Humane Society of North Iowa. I further understand that any vaccinations or treatments would be at my own expense. I hereby waive any and all claims against, and agree to hold harmless, the Humane Society of North Iowa, its Board of Directors, officers, agents, and employees, for any and all liability associated with and arising out of my services as a volunteer.

I have reviewed and understand the terms of this Waiver. I have been afforded the opportunity to ask any questions, and my questions have been answered to my full satisfaction. I sign this waiver voluntarily and with full knowledge of its contents for myself and on behalf of any minors I am supervising.

Signature of Volunteer

Date

Signature of Parent or Guardian
 (If volunteer is at 16 or 17 years old and will volunteer unsupervised)

Date