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TERRE HAUTE HUMANE SOCIETY, INC.

Application to Volunteer

(PLEASE print clearly so that we can communicate with you effectively)

Date: _____

DOB: _____

Sex: M F

Name: _____

Address: _____

City, ST, Zip: _____

Phone (H): _____ Phone (Other): _____

***Email** (best point of contact for us): _____

Emergency Contact Information:

Name: _____ Relation: _____

Phone (1): _____ Phone (2): _____

Are you currently (circle all that apply):

Retired Employed PT Employed FT Student (grade): _____

How many hours would you like to volunteer.... per week? _____

per month? _____

How long would you like your commitment to last? _____

How did you learn about volunteering here at THHS? _____

Liability Waiver:

I hereby acknowledge and recognize the possible risk in working with or driving animals, and that it can lead to serious injury, or even death. I hereby understand and assume the responsibility of any and all liability and risk associated with volunteering at the Terre Haute Humane Society, Inc. (THHS). I hereby waive and release THHS, its agents and representatives, from any and all claims which may accrue to me, my heirs, guardians, administrators, executors, or assignees, arising out of, or in connection with, being a volunteer. These include my attorney's fees and court (collecting cost 'claims') fees. I also grant permission to THHS and its authorized agents to use my name, image, and any other record of my participation.

Signature: _____ Date: _____

Parent/Guardian Signature
(if under 18 yrs of age): _____ Date: _____

I hereby give permission for the applicant to be transported to and treated by doctor(s) elected by THHS, in case of an emergency or accident. Volunteers under the age of 16 must bring adult supervision when they come to THHS.

Parent/Guardian Signature:
(if under 18 yrs. of age): _____ Date: _____