

# Volunteer Application



431 E. Chestnut Street  
Dunkirk, NY 14048  
www.lakeshorehumane.org  
Facebook.com/Lakeshore Humane  
Phone Number: (716) 672-1991

Interested in fostering? Please use our Foster Home Application instead of this one.

**PLEASE NOTE:** All volunteers are required to go through training.  
Dog Side: Ages 16-17 only with a parent/guardian.  
Cat Side: Children under 18 with a parent/guardian.

## Contact Information

Name	
Street Address	
City ST ZIP Code	
Home/Cell Phone	
Work Phone	
E-Mail Address	
Medical Insurance Provider	
Date of last tetanus shot	
Age 18 or over? Yes or No	Age if under 18:

I would like to help with (check all that apply):

- Dog Care     Cat Care     Cleaning     Laundry     Maintenance

**For Dog Care and Cat Care Only:** Please indicate availability in the chart below.

**Check Morning or Afternoon on Each Day You Are Available**

Note: you will only be asked to cover 1 or 2 shifts out of those checked.

Days Available	Morning (about 7:30 – 9:30 am)	Late Afternoon (about 4:00 – 6:00 pm)
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

In addition, a few experienced dog volunteers are needed to let the dogs out in the evenings (about 8 - 9 pm).

**Please list two references – not relatives**

Name	Relationship	Phone Number

**Person to Notify in Case of Emergency**

Name	
Street Address	
City ST ZIP Code	
Home/Cell Phone	
Work Phone	
E-Mail Address	

**Waiver Agreement and Signature**

I understand that as a volunteer for the Lakeshore Humane Society, I will be working with animals with unknown and unpredictable characteristics and dispositions, and will be subjecting myself to various hazardous work conditions. I hereby assume the risk of any injury that may result from my volunteer services with Lakeshore Humane Society. By signing this application: I bind myself, my heirs, executors, administrators, and release and hold harmless Lakeshore Humane Society, its officers, directors and staff from any and all rights and claims for any and all damages, including attorneys' fees I may have arising out of any injuries or illnesses suffered by myself or my pets incidental to my voluntary services. I also give permission to LHS to verify the information on this application.

Print Name:	
Signature:	
Parent/Guardian Signature (if under 18):	Print Parent/Guardian Name (if under 18)
Date:	

Return to:  
Lakeshore Humane Society, Inc.  
431 E. Chestnut Street  
Dunkirk, NY 14048