



# Volunteer Application

233 Currie Avenue, Maryville, TN 37804  
(865) 980-6244

Date \_\_\_\_\_

Name \_\_\_\_\_  
Last First MI

Address \_\_\_\_\_  
Street Address City ST Zip Code

Email \_\_\_\_\_  
Put N/A If You Do Not Use a Computer

Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Please, provide your age if you are under 18 years of age: \_\_\_\_\_ Birth Date \_\_\_\_\_  
MM/DD/YYYY

## **IMPORTANT**

- For persons 13-17 years of age, BCAC **REQUIRES** their parent/guardian sign the application indicating permission has been granted for them to volunteer at the center.
- Persons 13-15 years of age may **ONLY** volunteer in small dogs. They **MUST have a parent or guardian on premises.**
- Persons 16+ years of age may volunteer alone anywhere in the center.
- **ALL VOLUNTEERS MUST ATTEND AN ORIENTATION CLASS** prior to volunteering.  
Orientation is held the **FIRST** and **THIRD SATURDAY** of each month at 10 am\* at the Blount County Operations Center 1221 McArthur Road Maryville, TN 37804. (\*unless the Saturday falls on a holiday weekend)
- Updates on closures can be found on our Facebook page: Friends of the Blount County Animal Center
- The Animal Center is open to volunteers 365 days a year. Volunteer duties will dictate times available.

Briefly explain why you want to volunteer at the Blount County Animal Center: \_\_\_\_\_  
\_\_\_\_\_

How many, and what kind of pets do you have at home? \_\_\_\_\_

As a volunteer, are you willing to commit 2 hours weekly? Yes \_\_\_\_ No \_\_\_\_

**2 hours is the minimum, but more hours are welcomed and appreciated**

Tell us where you wish to volunteer at the Center. We offer opportunities in the Cattery, walking large or small dogs, administration/clerical, Adoption Coordinators, transport, general cleaning, laundry/dishes, photography, and/or vetting (volunteering in Vetting requires some prior training and experience).

1<sup>st</sup> Choice \_\_\_\_\_ 2<sup>nd</sup> Choice \_\_\_\_\_

Center Leads/Trainers are responsible for the various areas where Volunteers work. Once you select where you want to volunteer, you will be assigned a Lead/Trainer to assist you through the process.

**Extremely Important:** You are expected to keep your commitment. If you cannot come at your assigned time, let your Area Lead know **IN ADVANCE**. Mark your calendar, and please do not make other appointments during this time. Remember, the animals and staff are counting on you!!!!

Your orientation will cover the rules and procedures of the BCAC. It will also discuss the risks of working with animals who may be frightened. These risks are greatly minimized by adhering to the Center's protocols and procedures.

The BCAC staff appreciates your commitment to volunteering and we want to help make your volunteer experience a rewarding one.

**PLEASE READ and INITIAL**

- 1) I am becoming a BCAC Volunteer of my own free will and take any risks knowingly and by choice. \_\_\_\_\_
- 2) I acknowledge that there are potential risks to my person and property while caring for animals at BCAC. These risks include, but are not limited to bites, scratches, zoonotic diseases, and allergic reactions. I acknowledge that there is a potential of an allergic reaction to cleaning and laundry products used at BCAC. \_\_\_\_\_
- 3) I agree to hold harmless the Blount County Government, its officers, employees, and agents from any and all claims made by me arising from volunteering at the BCAC, or at any BCAC events. \_\_\_\_\_
- 4) I hereby waive and release the Blount County Government, its officers, employees, agents, and representatives from any and all liability of any nature for injury or damage which I may suffer, Including specifically, but without limitation, any injury or damage to me resulting from the action of any animals, or the actions of the BCAC, its employees, agents or volunteers. I expressly assume the risk of such damage or injury while volunteering on the premises of the BCAC or the premises of any BCAC sponsored events. This waiver will remain in full force for the duration of my association with the BCAC. \_\_\_\_\_
- 5) I understand this is a voluntary position, that I am not required to volunteer and that I am agreeable to this waiver as a condition of my being allowed to volunteer at BCAC. \_\_\_\_\_
- 6) I agree to abide by the rules and procedures presented to me during orientation at all times while volunteering at the BCAC facility or at BCAC events. \_\_\_\_\_
- 7) I acknowledge that my image may be captured while volunteering for BCAC, and I give my permission to BCAC to use any images or videos taken of me for public use. \_\_\_\_\_

Volunteer Signature \_\_\_\_\_ Date \_\_\_\_\_

Volunteer Name Print \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature\* \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Name Print\* \_\_\_\_\_ Date \_\_\_\_\_

\*For Volunteers Under 18 Years of Age