



# VOLUNTEER APPLICATION



COUNTRYSIDE HUMANE SOCIETY, INC.  
2706 CHICORY ROAD • RACINE, WI 53403  
PHONE: 262-554-6699 • FAX: 262-554-8640  
[WWW.COUNTRYSIDEHUMANESOCIETY.COM](http://WWW.COUNTRYSIDEHUMANESOCIETY.COM)

## VOLUNTEER INFO (REQUIRED)

NAME: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_  
 EMAIL: \_\_\_\_\_ I AM UNDER 18   
 EMERGENCY CONTACT: \_\_\_\_\_ I AM AN ADULT (18 OR OLDER)   
 CONTACT PHONE: \_\_\_\_\_

NOTES: \_\_\_\_\_

## ADDITIONAL INFORMATION (REQUIRED)

PLEASE ENTER THE HOURS YOU ARE AVAILABLE FROM AND TO: *EXAMPLE: 9AM-1PM*

MON

TUES

WED

THURS

FRI

SAT

PLEASE CHECK THE VOLUNTEER ACTIVITIES THAT YOU ARE INTERESTED IN:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> FUND-RAISING COMMITTEE         | <input type="checkbox"/> COMMUNITY ACTIVITIES     | <input type="checkbox"/> ON-CALL VOLUNTEERING |
| <input type="checkbox"/> ASSISTING CUSTOMERS IN SHELTER | <input type="checkbox"/> ANIMAL SOCIALIZATION     | <input type="checkbox"/> OTHER _____          |
| <input type="checkbox"/> ANIMAL/SUPPLY TRANSPORT        | <input type="checkbox"/> CHS DOG WASH             |   |
| <input type="checkbox"/> FOSTER CARE                    | <input type="checkbox"/> GROUNDS MAINTENANCE      |   |
| <input type="checkbox"/> SHELTER CLEAN-UP/MAINTENANCE   | <input type="checkbox"/> AT HOME SHELTER PROJECTS |   |

I, \_\_\_\_\_ would like to volunteer for Countryside Humane Society, Inc. (CHS). I understand that volunteering with and around animals at the CHS Animal Shelter may present some hazards and that injuries may occur. I further release Racine County, Countryside Humane Society, it's directors, officers, members, staff and volunteers from any and all claims that may arise from or are related to any damages or injuries that occur while I am supplying volunteer hours.

*This release will be valid until I am no longer involved in the volunteer program.*

DATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\_\_\_\_\_  
VOLUNTEER SIGNATURE

\_\_\_\_\_  
GUARDIAN SIGNATURE

*Office Use Only*

ANTICIPATED SCHEDULE \_\_\_\_\_ DATE OF ORIENTATION \_\_\_\_ / \_\_\_\_ / \_\_\_\_

NOTES \_\_\_\_\_