

Junior Volunteer Application

This form is to be read and completed by the parent/legal guardian and the junior volunteer before being submitted to the New Rochelle Humane Society.

Please Print All Information!

I am the (please circle one): Parent Legal Guardian

Parent/Legal Guardian's name: _____

I give permission for the following child/children to participate in the New Rochelle Humane Society's activities:

Child's Name: _____ Age: _____ Date of Birth: ___/___/___

Child's Name: _____ Age: _____ Date of Birth: ___/___/___

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: _____ Cell Phone: _____

Emergency Phone: _____ Email: _____

School(s) children are attending: _____

Describe experience with dogs/cats: _____

Animals in your household: _____

Permission and Release of Liability

 Please Initial:

 My child/children will abide by the mission, rules, regulations, policies and programs of the New Rochelle Humane Society.

 I assume the risks of my child/children being bitten, scratched, injured or frightened by the cats, kittens, dogs, puppies and other animals in connection with my volunteer work for the New Rochelle Humane Society.

 The New Rochelle Humane Society is not liable for any injuries, damages, liabilities, cost or expenses whatsoever, which my child/children might suffer or sustain in connection with the performance of their volunteer activities for the New Rochelle Humane Society.

 I hereby release and indemnify, defend and hold harmless the New Rochelle Humane Society's directors, officers, employees, agents, and volunteers and their heirs, successors, assistants and personal representatives from and against liability.

 I have accurately completed this volunteer application.

PARENT/GUADIAN

JUNIOR VOLUNTEER APPLICANT

(Sign Name)

(Sign Name)

(Print Name)

(Print Name)

**The New Rochelle Humane Society
70 Portman Road
New Rochelle, NY 10801
Ph: 914.632.2925 / Fax: 914.632.0445**