## IN HARMONY WITH NATURE ANIMAL HAVEN VOLUNTEER APPLICATION FORM

NAME
ADDRESS
PHONE NUMBER
EMAIL ADDRESS
In Harmony with Nature's policy is that all volunteers must be over the age of 18. Do you meet that requirement?
YES NO
Are you wanting to receive community service hours?
YES NO
IF YES, Please explain why
Will you be able to volunteer at least one day a week for a minimum of 3 hours?
YES NO
If you answered NO, Please explain the amount of time you will be able to donate

Have you had any previous experience with animals?
YES NO
Please explain
Are you comfortable approaching and handling animals that you are not familiar with?
YES NO
Please explain
By volunteering for an animal rescue, are you willing to assume the risks that may be involved with working with animals that may be unpredictable?
YES NO
Would you be willing to help out at adoption events that are off site in the local Orlando area?
YES NO
We rescue both dogs and cats. Do you have a preference when working with our animals?
YES NO

Do you dirty?	agree to wear closed shoes, long pants and appropriate clothes that can get
YES	NO
Would	you be interested in fostering?
YES	NO
Please	explain
	on-profit organization we are constantly looking for ways to raise funds for scue. Are you interested in helping at fund raising events?
YES	NO
Please	explain
	e another area of volunteering that you are interested in? If you feel you have al skill, interest or talent that could benefit the rescue and our animals, please n.

We post our volunteer schedule on Facebook and communicate weekly with our volunteers via this private page. Do you have a facebook page?
YES NO
If not, are you willing to join, so you can receive on-going communication and training tips?
YES NO
IF not, please explain
In case of an emergency, medical or otherwise, what is the name and number of a person that we should contact?
NAME
RELATIONSHIP

PHONE NUMBER

IN ADDITION TO THE APPLICATION THAT YOU JUST COMPLETED, PLEASE COMPLETE THE FOLLOWING FORMS, PRINT EVERYTHING OUT, HAVE THE PACKET NOTARIZED AND BRING IT WITH YOU TO YOUR ORIENTATION.

\*THIS PACKET MUST BE COMPLETED AND NOTARIZED BEFORE YOU ATTEND YOUR ORIENTATION.

## Volunteer Code of Conduct

IN HARMONY WITH NATURE is a drug-free volunteer organization. Drug and alcohol use while working with the animals will impair your ability to make sound and safe decisions. This can prove especially dangerous around exotic animals and tools. *If you appear to be impaired in any way, appropriate action will be taken to assist you in leaving the premise.* Assistance may come in the form of a designated driver, a cab, or one of ORANGE County's deputies.

Clothing should be neat, presentable, and appropriate for working in and around animals while in a family setting. Clothes that are too tight can impede movement and limit your range of motion while loose clothing can become a tripping hazard or target for playful animals. Keep in mind that whatever you wear will get dirty and possibly torn. Tank tops, Shirts and other items advertising alcohol or displaying obscene slogans are not appropriate. Long sleeves and jeans do provide more protection, but can be too hot in the summer. Long cargo shorts or long capris are allowed. Our animals do have claws and can become exuberant in welcoming our volunteers. Use your discretion, but KIM KAPES, as director, will have final say.

Refrain from using obscene language while on the premise. *Treat all animals and volunteers with courtesy and respect at all times.* As a volunteer, you are expected to remind others of this policy as well. Do not ask another volunteer to do something that you are *unwilling* to do...being *unable* to do something is a totally different matter. Any difficulties with another volunteer should be addressed with that volunteer. If that action does not resolve the issue, it should be taken to KIM. Anything involving more than a polite request to change the behavior of another volunteer will be addressed BY KIM. The only exception to this is an immediate and serious safety or liability concern *at that moment.* 

While on IHWN premise, I promise to abide by established *Policies & Procedures* for the safety of the animals, myself, and those around me. I will bring a positive attitude and take a pro-active stance to the care of the animals in my charge, reporting all anomalies or unusual behavior.

I understand the above code of conduct and agree to uphold & abide by it while at

Witness Signature

IHWN:		
Volunteer Signature	Printed Name	Date

Printed Name

Date

## ASSUMPTION OF RISK AND RELEASE OF LIABILITY

I have requested an interaction with one or more animals under the control of In Harmony With Nature Animal Haven (IHWN Inc.) ("IHWN"). I understand and acknowledge that animals can be unpredictable and that interaction with animals includes risk of property damage or personal injury. I understand that neither my actions nor the actions of animals can be controlled by IHWN and that my safety cannot be guaranteed while interacting with IHWN animals. Understanding the risks involved, I voluntarily choose to interact with IHWN animals and I EXPRESSLY ASSUME THE RISKS OF DOING SO. On behalf of myself, my heirs or legal representations and assigns, I HEREBY RELEASE AND FOREVER DISCHARGE IHWN AND ITS OFFICERS, DIRECTORS, EMPLOYEES, AGENTS AND VOLUNTEERS ("THE RELEASED PARTIES") FROM ALL CLAIMS ACTIONS. DEMANDS. RIGHTS. CAUSES OF ACTION AND LIABILITIES BASED UPON ANY INJURY OR DAMAGE OF WHATEVER NATURE THAT MAY BE SUSTAINED OR SUFFERED BY ME OR ANY OTHER PERSON AS A CONSEQUENCE OF MY INTERACTION WITH AN IHWN ANIMAL. I agree to be responsible for any IHWN animal while that animal is under my control, and I agree to hold each of the Released Parties harmless from any third party claims for damages arising out of or due to my interaction with an IHWN animal.

PRINT NAME
SIGN NAME
DATE
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STATE OF FLORIDA
COUNTY OF ORANGE
The forgoing document was acknowledged before me thisday of
201 By
who personally appeared who proved to me on the basis of satisfactory evidence to
be the person(s) whose name(s) is/are subscribed to the within instrument and
acknowledged to me that he/she/they executed the same in his/her/their
authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s)acted, executed the
instrument.
notary signature NOTARY STAMP
NUTAKTATAWE