

ANIMAL SERVICE CENTER OF THE MESILLA VALLEY



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VOLUNTEER APPLICATION

Thank you for your interest in volunteering with the Animal Service Center of the Mesilla Valley. Volunteers are crucial to our efforts in keeping the animals of our community healthy and happy.

Please complete the Volunteer Application and mail, email, or hand deliver this form:

Animal Service Center of the Mesilla Valley

**Attn: Volunteer Programs
3551 Bataan Memorial West
Las Cruces, NM 88012
Phone: (575)382-0018**

Email: DClark@las-cruces.org

The Mission of the Animal Service Center of the Mesilla Valley is to provide safe shelter for all lost, mistreated, and abandoned animals of the Mesilla Valley and surrounding communities. ASCMV utilizes all avenues available to it in placing each animal into a safe, loving, and permanent home whenever possible. We strive to meet the highest standards of humane animal care to promote responsible pet ownership through public education and outreach.



ASCMV

VOLUNTEER APPLICATION

3551 Bataan Memorial West, Las Cruces, NM 88012
(575) 382-0018 Fax: 575.373.2819

Name: _____
First Middle Initial Last

Telephone #: () () ()
Cell Work Alternate

Email Address: _____ * include for scheduling & updates

Driver's License/I.D. #: _____ (photocopy will be made) State: _____

Emergency Contact: _____ ()
Name Phone #

1). Are you over the age of 18? Yes If No, what is your age _____ ***Must be 18 or older or /w/ guardian. Volunteer application for parent/guardian or sponsor must accompany this form if minor is under 18 years of age****

2). Please choose your areas of interest from the following list:

- | | | |
|---|--|--|
| <input type="checkbox"/> Dog-Walking | <input type="checkbox"/> Education Outreach | <input type="checkbox"/> Cat adoptions Off-Sites |
| <input type="checkbox"/> Event Set-up Assistant | <input type="checkbox"/> Laundry Assistant | <input type="checkbox"/> Adoption Assistant off-site's |
| <input type="checkbox"/> Transport Driver | <input type="checkbox"/> Photography Team Animal Handler | <input type="checkbox"/> Office Greeter |

Please list any other areas of interest not listed above: _____

3). How did you hear about the volunteer opportunity? (please check all that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Las Cruces Sun News | <input type="checkbox"/> Las Cruces Bulletin | <input type="checkbox"/> ASCMV Website |
| <input type="checkbox"/> Farmers Market | <input type="checkbox"/> Facebook | |
| <input type="checkbox"/> PetCo/Pet's Barn | <input type="checkbox"/> Word of Mouth | <input type="checkbox"/> Radio Station |

Other: _____

4). Why are you interested in volunteering at ASCMV? _____

5). If you are volunteering for an assignment from another organization or program, please indicate the following:

* Volunteer hours are not counted towards any court ordered community service program*

Name of Agency: _____ Phone #: _____

Contact Person: _____ Hours Required: _____

6). Please check the types of animals you are comfortable handling/fostering.

- | | |
|--|--|
| <input type="checkbox"/> Small Adult Dogs | <input type="checkbox"/> Reptiles or Spiders |
| <input type="checkbox"/> Large Adult Dogs | <input type="checkbox"/> Small Breed Puppies |
| <input type="checkbox"/> Puppies | |
| <input type="checkbox"/> Cats | <input type="checkbox"/> Kittens |
| <input type="checkbox"/> Rabbits | <input type="checkbox"/> Ferrets |
| <input type="checkbox"/> Rats, Guinea Pigs, etc. | <input type="checkbox"/> Small Birds |
| <input type="checkbox"/> Livestock | <input type="checkbox"/> Others: _____ |

7). Do you have any experience working with animals? No Yes, - _____

8). How long are you planning to volunteer for the Center?

From: _____ To: _____

Comments: _____

- 9). What languages do you speak? _____
- 10). Do you have any convictions pertaining to criminal offense that resulted in imprisonment? No Yes
If yes, please explain: _____
- 11). Have you ever visited ASCMV before? No Yes
- 12). Do you have any experience as a volunteer, including this shelter? No Yes
If yes, with what organization? _____
- 13). Have you ever adopted an animal from ASCMV before? No Yes, - When? _____
If Yes, do you still have the animal? Yes No, - What happened to it? _____
- 14). Are you a member of any animal welfare organizations? No Yes, - Which? _____
* Volunteer role with other animal organization or rescue: _____
- 15). Do you have any Pets? No Yes, - How many? _____
- 16). ASCMV volunteering assignments require contact with the public and patience with a variety of personalities. Do you anticipate any problems for you in this regard?
 No Yes, - How so? _____
- 17). Do you have any medical issues, allergies, or disabilities that might limit your physical activity at the animal shelter?
 No Yes, - How might your activity be limited? _____
- 18). Please list any special animal related skills that you feel might be helpful to ASCMV: _____

* Volunteer Hours of operation are: **8am-10am daily; Monday –Friday Noon-5PM and Saturday/ Sunday Noon-4PM**

- 19). Please list three references 18 years of age or older for this application:
- 1). Name: _____ Phone #: _____
Relationship: _____
- 2). Name: _____ Phone #: _____
Relationship: _____
- 3). Name: _____ Phone #: _____
Relationship: _____

I certify that all of the statements in this application are true and understand that misrepresentation or omission of facts asked for in this application is cause for denial of volunteer membership and/or termination of volunteer membership.

* _____ * _____
APPLICANT'S SIGNATURE DATE

OFFICE USE ONLY			
Volunteer Application is: <input type="checkbox"/> Approved <input type="checkbox"/> Denied Comments: _____			

CENTER SUPERVISOR/COORDINATOR	PRINTED	SIGNATURE	DATE



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VOLUNTEER AGREEMENT

In consideration of this opportunity to volunteer at the Animal Service Center of the Mesilla Valley (Center), I _____, agree to the following terms and conditions, and understand that I am legally bound by them.

- _____ *Initial* - I understand that any unauthorized disclosure of ASCMV proprietary or confidential information, including email to the media, other organizations, or persons is strictly prohibited, and grounds for immediate release from ASCMV.
- _____ *Initial* - I understand that ASCMV reserves the right to terminate this Volunteer Agreement at any time for any reasons it sees fit.
- _____ *Initial* - I understand that my services are provided on a volunteer basis without pay or compensation of any kind and that all services will be performed at my own risk.
- _____ *Initial* - I agree to conduct myself in a courteous and professional manner as a volunteer and as a representative of ASCMV.
- _____ *Initial* - I agree to treat all animals, fellow volunteers, ASCMV staff and the public with dignity and respect.
- _____ *Initial* - I authorize ASCMV to contact the emergency contact on the Volunteer Application and seek emergency medical care in case of an accident, injury, or illness.
- _____ *Initial* - I understand ASCMV reserves the right to verify all the information on the Volunteer Application.
- _____ *Initial* - I have read and fully understand the above stated terms and conditions and agree to abide by the mission, rules, regulations and policies of ASCMV. I further understand that my failure to follow ASCMV and its established policies and procedures can result in my dismissal as a volunteer.

* _____ *

APPLICANT'S SIGNATURE DATE

 ASCMV REPRESENTATIVE PRINTED SIGNATURE DATE

Volunteer Contact phone number
Emergency Contact name, phone number



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LIABILITY RELEASE FORM

- I, _____, agree to release, discharge, indemnify, and hold harmless the Animal Service Center of the Mesilla Valley (hereinafter "ASCMV") for any and all damage to my personal property and or self while performing my volunteer services to the Center.
- _____ *Initial* - I recognize that in handling animals at ASCMV while performing my volunteer services there exists a risk of injury including personal physical harm. On behalf of myself, my heirs, personal representative and executors, I release ASCMV and employees from any and all claims, causes of action or demands, of any nature or cause connected with my Volunteer Agreement or volunteer activities. This might include costs and attorney's fees and court costs incurred by ASCMV in connection with my volunteer services based on damages or injuries, which may be sustained in any way. Such damages or injuries might include but are not limited to animal bites, Disease or cross contamination to personal pets, accidents, injuries, and personal property damage.
- _____ *Initial* - I understand that public relations are an important part of volunteering at ASCMV. I therefore agree, on behalf of heirs, my personal representatives, executors, to allow ASCMV to use any photographs, videos, DVD, or other visual representations taken of me for use in public relation efforts without payment. ASCMV will use reasonable efforts to notify me, however, such notification is not a condition of the photograph's release for public relations purposes.

* _____

Represented Organization _____ * _____ * _____
VOLUNTEER'S SIGNATURE DATE

ASCMV REPRESENTATIVE _____ PRINTED _____ SIGNATURE _____ DATE _____

Release by Parent or Legal Guardian

(of volunteers 17 years of age and younger)

- I, _____, as a parent or legal guardian of the above-named volunteer, I hereby give my consent to allow my child/ward to volunteer services for the Animal Service Center of the Mesilla Valley as described within this Volunteer Agreement.
- _____ *Initial* - I have read this Volunteer Agreement and fully understand all terms and conditions. On behalf of my child/ward, and myself I agree to all terms and conditions as set out in the Volunteer Agreement -paying special attention to the Release section herein.

* _____ * _____
PARENT'S/GUARDIAN'S SIGNATURE DATE

NOTES:
