



ADULT VOLUNTEER APPLICATION

Welcome to the Bermuda SPCA Volunteer Program. Adult volunteers are over the age of 18yrs. All volunteers are required to complete a volunteer application and attend a volunteer training session

Please PRINT neatly.

First Name:

Last Name:

Date of Birth: / /
 day month year

Last Tetanus Shot: / /
 day month year

Mailing Address:

Parish:

Post Code:

Phone (home):

(cell):

(work):

Volunteer's email:

Do you have any special needs to consider?

Why do you want to volunteer at the SPCA?

Do you own pets? YES NO

If yes, please list:

Describe your experience working with animals:

A volunteer handbook will be provided to volunteers assisting Animal Care Staff in the Shelter and additional training may be required.

I _____ of (parish) _____, Bermuda hereby agree to accept a position as a volunteer worker for the Bermuda Society for the Prevention of Cruelty to Animals (SPCA), and in so doing, I agree to comply with all of the rules and regulations as attached which have been explained to me fully and which I understand. I understand that failure to do so may result in immediate termination as a volunteer.

I recognize that in handling animals and performing other volunteer tasks, a risk exists of injury, including physical harm, caused by the foregoing. On behalf of myself, my heirs, personal representatives and executors, I hereby release, discharge, indemnify and hold harmless the SPCA, its agents, servants, and employees from any and all claims, causes of action (including any claim or cause of action based on negligence), or demands, of any nature or cause, including (without prejudice to the generality of the foregoing) costs and attorney's fees incurred in connection with the same, based on damages or injuries which may be incurred or sustained by him/her in any way connected with his/her services for the SPCA, including but not limited to, animal bites, accidents, or injuries.

Date

Signature