



WAYNE COUNTY **DOG SHELTER** ADOPTION CENTER

5694 BURBANK ROAD • WOOSTER, OH 44691 • 330-345-1018

Volunteer Opportunities at the Wayne County Dog Shelter

Thank you for your interest in volunteering at the Wayne County Dog Shelter! Volunteers play a vital role in ensuring our dogs receive the love, care, and attention they deserve while they await their forever homes. Below, you'll find information about various volunteer activities, our availability, and how you can learn more about volunteering with us!

Volunteer Activities

1. Dog Walking

Help our dogs stay active and socialized by taking them for walks around the shelter's property. This also provides enrichment and helps them burn off energy.

2. Kennel Cleaning

Assist our staff by keeping the kennels clean and sanitary. This is a critical part of ensuring the dogs stay healthy and comfortable.

3. Adoption Events

Join us at off-site adoption events to help showcase our dogs to potential adopters. You can assist with setup, answer questions, and support staff.

4. Socialization and Playtime

Spend one-on-one time with the dogs, offering them companionship, affection, and playtime. This helps the dogs feel more at ease and boosts their adoptability.

5. Administrative Support

Help with office tasks such as data entry or creating adoption folders.

Shelter Hours and Availability

The Wayne County Dog Shelter is open during the hours listed below. Volunteers are welcome during these hours, and scheduling is flexible. Whether you have an hour or an afternoon to give, your time will make a difference!

- **Tuesday - Friday:** 12:00 PM – 5:00 PM
 - **Saturday:** 9:00 AM - 2:00 PM
 - **Sunday - Monday:** Closed
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How to Learn More

- Visit our website: www.waynedogshelter.org
- Call us: **(330) 345-1018**
- Email us: dogs@wayneohio.org
- Stop by: **5694 Burbank Rd, Wooster, OH 44691**

We also ask that you view our volunteer orientation online prior to getting started. Details can be found on our website or by contacting us directly. Thank you for your interest in supporting the Wayne County Dog Shelter. Together, we can make a difference in the lives of our four-legged friends!

VOLUNTEER INFORMATION

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| NAME: | DATE: |
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| ADDRESS: |
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| | | |
|-------|--------|------|
| CITY: | STATE: | ZIP: |
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|---------------|---------------------------------|-------------------------------------|
| PHONE NUMBER: | <input type="checkbox"/> MOBILE | <input type="checkbox"/> OK TO TEXT |
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| EMAIL: |
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|---|------------------------------|-----------------------------|
| WOULD YOU LIKE TO BE ADDED TO OUR MAILING LIST? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
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| AGE: | DATE OF BIRTH: | GENDER: |
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I understand that if I am under 18 years of age I must be accompanied by an adult.

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|-------------------------|------------------------------|-----------------------------|--------------------------|
| VALID DRIVER'S LICENSE: | <input type="checkbox"/> YES | <input type="checkbox"/> NO | DRIVER'S LICENSE NUMBER: |
|-------------------------|------------------------------|-----------------------------|--------------------------|

FOR SHELTER USE: ATTACH A PHOTOCOPY OF VOLUNTEER DRIVER'S LICENSE TO THIS APPLICATION. INITIAL:

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|-----------------------|-----------------------|
| EMERGENCY CONTACT #1: | EMERGENCY CONTACT #2: |
| NAME: | NAME: |
| PHONE: | PHONE: |
| RELATIONSHIP: | RELATIONSHIP: |

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| DO YOU HAVE ANIMALS AT HOME? | IF YES, PLEASE LIST HOW MANY AND WHAT KIND: |
| <input type="checkbox"/> YES <input type="checkbox"/> NO | |

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| DETAIL YOUR EXPERIENCE WITH ANIMALS: |
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LIST ANY OF THE FOLLOWING THAT ARE IMPORTANT FOR SHELTER STAFF TO KNOW

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| ALLERGIES: | HEALTH OR PHYSICAL LIMITATIONS: |
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This is a dog shelter; please take precautions for any allergies you may have. Many shelter care tasks require bending and reaching. For some tasks a volunteer must be able to lift and carry up to 50 lbs. There are also a variety of cleaning agents used daily. Volunteers are responsible for determining whether they are physically able to safely perform volunteer tasks.

PLEASE INDICATE THE DAYS AND TIMES YOU ARE USUALLY AVAILABLE TO VOLUNTEER:

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| <input type="checkbox"/> TUE AVAILABLE HOURS: <i>SHELTER HOURS: 12:00 PM - 5:00 PM</i> | <input type="checkbox"/> FRI AVAILABLE HOURS: <i>SHELTER HOURS: 12:00 PM - 5:00 PM</i> |
| <input type="checkbox"/> WED AVAILABLE HOURS: <i>SHELTER HOURS: 12:00 PM - 5:00 PM</i> | <input type="checkbox"/> SAT AVAILABLE HOURS: <i>SHELTER HOURS: 9:00 AM - 2:00 PM</i> |
| <input type="checkbox"/> THU AVAILABLE HOURS: <i>SHELTER HOURS: 12:00 PM - 5:00 PM</i> | <i>The Shelter is closed Sunday and Monday. Several holidays are observed on Tuesday.</i> |

PLEASE CHECK ALL VOLUNTEER ACTIVITIES OF INTEREST:

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| <input type="checkbox"/> WALKING DOGS | <input type="checkbox"/> ADOPTION EVENTS | <input type="checkbox"/> FUNDRAISERS |
| <input type="checkbox"/> CLEANING KENNELS | <input type="checkbox"/> TRANSPORTING DOGS | <input type="checkbox"/> DOG'S DAY OUT |

VOLUNTEER AGREEMENT

INITIAL BELOW TO INDICATE:

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| | Volunteer understands that the Wayne County Dog Shelter reserves the right to accept or reject a request to be a volunteer, or to terminate a volunteer's participation at any time, with or without cause, to protect the safety of the shelter, its staff, volunteers, and animals. |
| | Volunteer understands that by volunteering they are representing the Wayne County Dog Shelter. All volunteers are to display a positive attitude while volunteering. Any negative behavior towards the public or towards a dog including hitting a dog, yelling at a dog, or comparable action will not be tolerated and the volunteer will be immediately dismissed. |
| | Volunteer agrees to sign in prior to starting any volunteer activity and sign out at the end of their activity. |
| | Volunteer agrees to wear proper identification at all times while volunteering for the Wayne County Dog Shelter. Volunteer must also wear appropriate clothing and shoes (flip flops, slides, or slip on shoes are not allowed). Volunteer understands that if they are wearing offensive clothing they will be asked to leave, this is at the discretion of the Wayne County Dog Shelter. |
| | Volunteer understands that they are only allowed in areas designated for volunteers unless directed by a staff member. |
| | Volunteer agrees to forward all questions or concerns regarding the Wayne County Dog Shelters policies and procedures to a staff member. These topics include but are not limited to adoptions, owner claim procedures, vaccinations, euthanasia, statistics etc. |
| | Volunteer agrees to immediately report any bite, scratch, injury, or unsafe animal behavior to shelter staff. Volunteer understands that failure to report such incidents may result in termination of volunteer privileges. |
| | Volunteers who transport animals must maintain a valid driver's license and proof of insurance. Volunteers use their personal vehicles at their own risk and the Wayne County Dog Shelter assumes no liability for vehicle damage, accidents, or injuries occurring during transport. |
| | Volunteers may only handle dogs that have been approved for volunteer interaction by shelter staff. Volunteers must read notations on white boards and signs on kennels prior to removing a dog from its' kennel. Volunteer agrees to follow all handling protocols including the use of slip leads, collars, double leashing, or other safety equipment as directed by staff. |
| | Volunteers may not handle dogs that have been designated as nuisance, dangerous, or vicious dogs under Ohio Revised Code Chapter 955 unless specifically authorized and supervised by shelter staff. |
| | Volunteers shall not remove any animal from the shelter property or transport animals without prior written authorization from the Dog Shelter Director or designated staff. |
| | If I am pregnant or suffer any physical problems that may be affected in any way by cleaning or other chemicals used in connection with my volunteering that may be detrimental to my health or the health of my fetus, I will temporarily cease any activity of my volunteer position that may be detrimental. Volunteers are responsible for determining whether they are physically able to safely perform volunteer tasks. |
| | Volunteer attests to having attended or viewed a Volunteer Orientation class required by the Wayne County Dog Shelter. |
| | Volunteer attests that they have never been charged with an animal related crime. If they have, Volunteer has fully disclosed all details to a staff member at the Wayne County Dog Shelter. |

VOLUNTEER RELEASE AND WAIVER OF LIABILITY

This Release and Waiver of Liability (“Release”) by the individual signing below (“Volunteer”) releases the Board of County Commissioners, Wayne County, Ohio, a political subdivision of the state of Ohio, and each of its offices, departments, including, but not limited to, the Wayne County Dog Shelter, and elected and appointed officials, employees, officers, agents, successors, assignees, and volunteers (hereafter referred to as “Board”) regarding any and all claims arising in direct relation to Volunteer’s assumption of activities related to serving as a volunteer. For purposes of this waiver, “volunteer” does not mean a guest speaker or lecturer providing services of a nominal duration.

1. Volunteer Status: Volunteer desires to provide volunteer services for the Board and engage in activities related to serving as a volunteer. Volunteer understands that the scope of Volunteer’s activities, as outlined above, are separate from Volunteer’s employment with the Board and that (i) no compensation is expected in return for services provided by Volunteer; (ii) that Board will not provide any benefits traditionally associated with employment to Volunteer for the services provided, including but not limited to insurance, retirement, accumulated vacation or sick time, holiday pay, or years of service; and (iv) that Volunteer is responsible for his/her own insurance coverage in the event of personal injury or illness as a result of Volunteer’s services to the Board. Volunteer is performing these services for civic, charitable or humanitarian reasons and as more fully defined by 29 C.F.R. 553.101.

By my initials indicated:

_____ Volunteer hereby states that Volunteer has not received a promise, expectation or receipt of compensation for services to be rendered;

_____ Volunteer hereby states that Volunteer’s services are being offered freely and without pressure or coercion, direct or implied from the Board;

_____ Volunteer is not currently employed by the Board to perform the same type of services being offered in a volunteer status.

2. Waiver and Release: Volunteer hereby releases and forever discharges and holds harmless the Board and its successors and assigns from any and all liability, claims, and demands of whatever kind of nature, either in law or in equity, which arise or may hereafter arise from the services Volunteer provides to Board. Volunteer understands and acknowledges that this Release discharges the Board from any liability or claim that Volunteer may have against the Board with respect to providing volunteer services, including but not limited to: breach of contract, bodily injury, personal injury, illness, death, or property damage that may result from the services Volunteer provides to the Board or occurring while Volunteer is providing services. Volunteer understands their responsibilities as outlined in this agreement.

3. Assumption of Risk: Participation in the aforementioned volunteer activity carries with it certain risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks may include, but are not limited to: 1) minor injuries such as but not limited to, scratches, bruises, and sprains; 2) major injuries such as but not limited to eye injury or loss of sight, joint or back injuries, heart attacks, and concussions; and 3) catastrophic injuries including but not limited to paralysis and death. I understand, and acknowledge that these and other unforeseeable risks are inherent to participation in the above activity.

Volunteer understands that many dogs housed at the Wayne County Dog Shelter are stray animals or animals with limited or unknown history. Some dogs may have previously exhibited aggressive behavior or may later be classified as nuisance, dangerous, or vicious dogs under Ohio Revised Code Chapter 955. Volunteer acknowledges that working with such animals presents inherent risks including but not limited to bites, scratches, bruising, knockdowns, and other injuries that may be considered minor, major, and/or catastrophic and voluntarily assumes these risks.

Volunteer acknowledges that animals housed at the shelter may carry contagious diseases or parasites that may be transmitted to humans or other animals including but not limited to rabies exposure, ringworm, kennel cough,

intestinal parasites, fleas, ticks, and other zoonotic diseases. Volunteer understands that exposure to shelter animals may present a risk to animals residing in the volunteer's household.

Volunteer assumes all risks associated with such exposure to themselves and their pets as well as all responsibility for protecting their own animals from potential disease exposure.

I hereby assert that my participation is voluntary and I knowingly assume all such risks. Furthermore, I understand that I will be responsible for any medical or other charges in connection with this activity.

4. Insurance: Further, Volunteer understands that the Board does not assume any responsibility for or obligation to provide financial or other assistance, including but not limited to medical, health, or disability benefits, unemployment benefits, worker's compensation or any other insurance in connection with volunteer services. Volunteer expressly waives any such claim for compensation or liability on the part of the Board.
5. Release Scope: Volunteer expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Ohio and that this Release shall be governed by and interpreted in accordance with the laws of the State of Ohio. Volunteer agrees that in the event that any clause or provision of this Release is deemed invalid, the enforceability of the remaining provisions of this Release shall not be affected. By signing below, Volunteer expresses understanding and intent to enter into this Release and Waiver of Liability willingly and voluntarily.
6. Governmental Immunity: Participant hereby releases, waives, discharges, and covenants not to sue, the Board, nor any of its elected and appointed officials, employees, officers, agents, successors, assignees, and volunteers regarding any and all claims arising in as a result of Participant's participation in the aforementioned campus activity. To the fullest extent permitted by law, Participant shall indemnify, defend, and hold harmless the Board, its elected and appointed officials, employees, officers, agents, successors, assignees, and volunteers from any and all claims, lawsuits, losses, and liability arising out of Participant's involvement in this activity. Further, the Board does not waive its Governmental/Sovereign Immunity by executing or entering into this Waiver/Agreement and specifically retains all immunities and defenses available to it as a governmental entity.
7. Rules: Volunteer agrees to abide by the Board's policies and procedures and any further amendments to the same that govern the operation and activities of the volunteer service. Volunteer agrees to comply with any specific instruction or request given by the supervisor of the volunteer service.

VOLUNTEER WAIVER OF CLAIMS

Acknowledging that working with dogs is inherently dangerous and may cause situations where an incident could occur causing injury, harm, damage and even death, the undersigned hereby acknowledges for and on behalf of the undersigned's benefit and all of the undersigned's successors and assigns, agents, representatives, attorneys, financial consultants, predecessors, spouses, heirs, principals, estates, beneficiaries, executors, administrators and all those acting by and through them (hereafter referred to as "Releasor"), does hereby release and forever discharge the Wayne County Dog Shelter and all of its employees, agents and overseers of the shelter and affiliated offices on behalf (hereinafter referred to as "Releasee"), from any and all causes of action or claims, of whatever kind of nature, by reason of any matter, including by way of example only and not as a limitation any and all claims of whatever kind of nature, actual or imagined, asserted or which may be asserted by Releasor against Releasee arising out of being at the premises of the Releasee, representing Releasee at any offsite function on behalf of the Releasee and in furtherance of Releasor working at, with or in connection with Releasee, for whatever cause, manner or purpose including but not limited to the care, handling, feeding, bathing, or caring for the shelter dogs.

The Volunteer and/or authorized Releasor hereby acknowledges and certifies that he/she is at least 18 years of age. The Releasor hereby carefully read the foregoing, understands the terms of this Release Waiver and signs it of his/her free will. The Releasor agrees to be bound by the terms and conditions set forth in this Volunteer Release, Waiver of Liability and Waiver of Claims, and agrees that in the event there is a violation of any of the foregoing, Releasee may take whatever

action it deems necessary to enforce this Release/Waiver, and Releasor agrees to pay for any and all costs, of whatever kind of nature, including reasonable attorney's fees and costs, incurred by Releasee in connection with the enforcement of this Volunteer Release, Waiver of Liability and Waiver of Claims or any of the terms contained therein.

I have had the opportunity to ask any and all questions regarding this Release/Waiver. This Release/Waiver contains the entire agreement between the parties herein and the terms of this Release/Waiver are contractual and not a mere recital.

I am aware that by signing this Release, I assume all risks and waive and release certain substantial rights that I may have. I acknowledge that this Release is binding upon myself, my heirs, executors, administrators, and representatives in the event of my death or incapacity.

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| VOLUNTEER'S PRINTED NAME | VOLUNTEER'S SIGNATURE | DATE |
| <i>PARENT/LEGAL GUARDIAN'S SIGNATURE IS REQUIRED BELOW IF VOLUNTEER IS UNDER THE AGE OF 18</i> | | |

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| PARENT/LEGAL GUARDIAN PRINTED NAME | PARENT/LEGAL GUARDIAN SIGNATURE | DATE |

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| SHELTER REPRESENTATIVE PRINTED NAME | SHELTER REPRESENTATIVE SIGNATURE | DATE |

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| SHELTER DIRECTOR PRINTED NAME | SHELTER DIRECTOR SIGNATURE | DATE |

VOLUNTEER RELEASE FORM FOR MINORS (UNDER THE AGE OF 18)

PARENTAL CONSENT REQUIRED

I, _____ being the parent or legal guardian
PRINTED NAME OF PARENT/LEGAL GUARDIAN

of _____ (the "Minor") hereby consent to
PRINTED NAME OF MINOR

and authorize the Minor to act as a volunteer for The Wayne County Dog Shelter (the "Shelter").

I acknowledge and agree that activities performed by the Minor as a volunteer will be performed strictly on a voluntary basis, without any pay, compensation, or benefits. I agree and understand that the Minor must comply with the rules and regulations established by the Shelter and that failure to do so may result in the Minor's immediate removal as a volunteer.

I am aware of the nature of the activities to be performed by the Minor as a volunteer and recognize that in performing volunteer tasks, a risk of harm or injury exists. I agree that all volunteer activities are to be performed by the Minor at the Minor's risk and I assume full responsibility therefore.

On behalf of myself, the Minor, and our respective heirs and personal representatives, I agree not to hold or attempt to hold the Shelter, their population served, volunteers, or staff, responsible for any injury or damage sustained or incurred by the Minor, arising out of or in any way connected with the Minor's activities as a volunteer for the Shelter. I hereby release and discharge the Shelter, their employees, and their volunteers from any and all claims, demands, causes of action of any nature or cause, for any such injury or damage incurred or suffered by the Minor.

PARENT/LEGAL GUARDIAN'S PRINTED NAME

PHONE NUMBER

PARENT/LEGAL GUARDIAN'S SIGNATURE

DATE

PHOTO WAIVER

I hereby grant Wayne County Dog Shelter permission to use my likeness in a photograph and/or video in any or all publications, including press and website entries, without payment or any other considerations.

I understand that these publications will become the property of Wayne County Dog Shelter and will not be returned. I authorize the above mentioned to edit, copy, exhibit and publish the photos for purposes of publicizing and promoting Wayne County Dog Shelter and all functions held under that name.

In addition, I waive any right to any royalties or other compensation arising or related to the use of the photograph.

SIGNATURE

DATE