

Luna's House, Inc.  
 P.O. Box 802  
 Abingdon, MD 21009  
 (410) 671-2954  
 info@lunashouse.org  
 www.lunashouse.org



<b>FOR OFFICE USE ONLY</b>
Date of Orientation: _____
Date of Training: _____
Entered into Database <input type="checkbox"/>

Luna's House, Inc. (LHI) is an animal welfare organization currently comprised entirely of volunteers, thus we are entirely dependent on our amazing volunteers to be a successful animal rescue group. We look forward to working with you!

**For safety reasons, LHI requires volunteers to be at least 10 years of age to work hands-on with cats, rabbits, or small animals, and at least 14 years of age to work hands-on with dogs.**

***Anyone under the age of 18 years must be accompanied by a parent or guardian at all times when volunteering for Luna's House.***

Steps to becoming a volunteer:

1. Please complete this Volunteer Agreement in its entirety.
2. Bring the completed application to a Volunteer Orientation. Orientations occur the second Wednesday of each month at 6:30pm at the Luna's House Animal Care and Education Center, 2801 Pulaski Highway, Edgewood, MD 21040.
3. Attend additional training classes as required for working with your chosen species or group of animals, or for other volunteering activities.

**Section One: Information about you**

Today's Date:	Are you 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name:	Date of Birth:
Street Address:	E-mail Address:
City, State, Zip	Home telephone:
Work telephone:	Cell telephone:
Please indicate the names of any other people with whom you will be volunteering:	
Name:	Relationship:
Name:	Relationship:
If you are here through a volunteer program with another agency, please indicate the following:	
Agency:	Address:
Name of Contact Person:	Telephone:
Do you have any allergies or medical conditions of which we should be aware? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If so, please explain: _____	
Please list a contact in case of an emergency: <i>(If you are under 18, this person must be a parent or guardian)</i>	
Name:	Relationship:
Work telephone:	Home phone:
Cell phone:	

<p>Have you adopted an animal from LHI? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, who did you adopt, and when?</p>
<p>Are you a member of any other animal welfare organization? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, how do you participate?</p>

Why would you like to volunteer with LHI? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Section Two: Background**

<p>Have you had any formal education/training in pet care or animal welfare?</p> <p>Where: _____ When: _____</p> <p>Type of education/training: _____</p>
<p>Have you done any other volunteer work?</p> <p>Where: _____ When: _____</p> <p>Type of work performed: _____</p>

**Section Three - Areas of volunteer interest (please check all that apply):**

- Direct Animal Care

Rank your preference for volunteering with each group of animals (Rank 1 as your highest preference, 4 as your lowest preference) :

\_\_\_\_\_ Dogs                      \_\_\_\_\_ Cats

\_\_\_\_\_ Rabbits                      \_\_\_\_\_ Small Animals (Small Mammals, Birds, and/or Reptiles)

*Please remember that you will start off working with only one type of animal. If you are volunteering as part of a group (i.e. a family with children under 18 years of age), you will all be volunteering together, with the same species/group of animals.*

- Foster Care
- Adopter Education/ Screening
- Donation Transporter
- Humane Education
- Fundraising Support
- Event Staffing

**Section Four - Areas of Expertise:**

Please indicate if you have any prior experience in the areas you've checked above in Section 3:

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Please indicate if you have an area of professional expertise that could be helpful. \_\_\_\_\_

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**Section Five - Availability:**

Please select all days and times you are usually available to volunteer (check all boxes that apply):

*(If you have a strong preference for a day and/or time, please circle the box for that day/time)*

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please note, children under 18 years of age must be accompanied by an adult when volunteering for LHI, with no more than two children per adult.

These conditions hold true unless previous arrangements have been made with Luna's House personnel.

Please submit a separate application and waiver for each person.

***Thank you!***



# Luna's House, Inc. Volunteer Agreement

Luna's House, Inc.  
P.O. Box 802  
Abingdon, MD 21009

410-671-2954  
Info@lunashouse.org  
www.lunashouse.org

When becoming a Luna's House, Inc. (LHI) volunteer, you will be required to abide by the terms of our Volunteer Agreement.

If accepted as a LHI volunteer, my signature below indicates that I have read, understand and agree to the following:

- I will treat all animals and other volunteers with respect and I will work as a team member with all volunteers. I understand that my opinions are considered very valuable to LHI management and will provide them openly, knowing that they will be respected and appreciated.
- I will abide by all LHI policies and procedures, and will read and follow all posted signs at the LHI facility.
- I agree to be supervised as appropriate by LHI personnel and will report any problems that arise directly to the proper LHI representative. LHI strives to work through issues as efficiently as possible to make the animals' conditions and your volunteer experience the best, most fulfilling they can be.
- I understand the possible risk of transferring disease-causing microorganisms from LHI foster homes or offsite adoption venues to my personal animals or vice versa and must have current vaccinations for my animals at home, as appropriate.
- I understand the potential safety risks of working with animals and that I may not bring friends or relatives with me while volunteering for LHI, unless they have also submitted a Volunteer Agreement and Waiver of Liability, have attended a Volunteer Orientation, and have received species-specific training to Volunteer for LHI.
- I am current on my tetanus vaccination and covered by a health insurance plan. I authorize LHI volunteers to seek emergency medical treatment for me in case of accident, injury or illness.
- I agree to indemnify and hold harmless LHI, its officers, agents, and volunteers from and against any and all liability whatsoever arising out of or related to my duties under this agreement or for any negligent act or omission by LHI, its officers, agents, and volunteers. (I understand that as a small animal rescue group, LHI cannot afford to be held liable for carelessness or clumsiness on my part).
- (Publicity Release) I unconditionally assign to LHI all rights, title, and interest I may have in any audio, audiovisual and/or photographic recording of me, including for the purpose of advertising, promotion or otherwise. I further agree that any such recording(s) shall remain the property of LHI.
- If I fail to abide by the terms of this Agreement or am otherwise unable to meet the requirements of the volunteer program, which are subject to change by LHI personnel, I understand that I will be asked to discontinue volunteering for Luna's House. I also understand that I may at any time be removed from my position as a volunteer at the discretion of LHI management. However, as we are an all-volunteer organization, we really need you and like having you around. So let's work together to help animals, and work out problems constructively, together 😊

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

If under 18, Signature of Parent/Guardian: \_\_\_\_\_

Relationship: \_\_\_\_\_

Date: \_\_\_\_\_

### Volunteer Waiver and Release of Liability



Everyone deserves a happy home

Date: \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

I, the undersigned, agree to release, discharge, indemnify and hold harmless Luna's House, Inc. (LHI), its officers, agents, and volunteers from any and all claims, demands, losses, costs, liabilities, damages, expenses and suits in law or in equity that may arise out of my performing services for LHI, its officers, agents, or volunteers.

I recognize that in handling animals while performing services for LHI, there exists a risk of injury including, but not limited to, personal physical harm. On behalf of myself, my heirs, assignees, guardians, and personal and legal representatives and executors, I hereby release, discharge, indemnify and hold harmless Luna's House, Inc., its officers, agents, and volunteers from any claims, demands, losses, costs, liabilities, damages and expenses connected with my services to or for LHI or my participation agreement, whether caused directly or indirectly by any negligence (active or passive) attributable to LHI, its officers, agents, and volunteers.

I have read and fully understand the Terms and Conditions of this Volunteer Agreement, Waiver and Release of Liability and I agree I will comply with said Terms and Conditions, as described herein.

LHI MAKES NO REPRESENTATIONS CONCERNING ANY ANIMAL'S EXPOSURE TO RABIES OR OTHER DISEASES.

As a Volunteer within LHI animal programs, I fully understand that LHI does not provide participants with medical insurance, workers' compensation, or automobile liability insurance coverage.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If the participant is younger than 18 years of age, the parent/legal guardian shall agree to the following:

As a parent or legal guardian of the above named person, I hereby give my consent to allow the undersigned to volunteer with Luna's House, Inc. and comply with the conditions of this Volunteer Agreement, Waiver and Release.

Printed Name of Parent/Legal Guardian: \_\_\_\_\_

Signature of Parent/Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_