

# HUMANE SOCIETY OF LEBANON COUNTY

150 RAMONA ROAD, MYERSTOWN, PA 17067

Phone 717-628-1369

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[www.lebanonhumane.org](http://www.lebanonhumane.org)

## **Volunteer Application and Information Form** **Senior/Graduation Project - under 18 years of age**

The Humane Society of Lebanon County encourages our young people to volunteer for the animals. You will not, however, be able to have direct contact with the animals (dog walking, etc.) until you are 18 years of age. Before you begin volunteering, you will attend one of our monthly volunteer orientations.

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Do you have a valid Driver's License? If so, please indicate the number below.

When is the best time to contact you? \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

How did you learn about volunteering at the HSLC? \_\_\_\_\_

Why would you like to volunteer with us?

\_\_\_\_\_  
\_\_\_\_\_

What other kind of volunteering have you done? \_\_\_\_\_

\_\_\_\_\_

Do you have any companion animals of your own? If yes, please describe: \_\_\_\_\_

\_\_\_\_\_  
\*\*Volunteering for Graduation/Senior Projects happens from 8:00 a.m. – noon Tuesday – Sunday each week. After you have your orientation, you will need to schedule your hours by noon on Saturday for the following week. Will those hours and days work for your schedule? Please circle one YES NO

Please circle volunteer area you may be interested in at this time (options will be explained in more detail at your orientation):

Cat Room Assistant

Dog Kennel Assistant

*Because of our liability and the possibility of accidents occurring, we ask that you release The Humane Society of Lebanon County of all responsibility by reading the following statement and signing below.*

I \_\_\_\_\_ (print name) release The Humane Society of Lebanon County from all responsibility in the event of an accident while serving as a volunteer. I understand that I may not have direct contact with the animals.

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

I \_\_\_\_\_ (print parent's name), parent/guardian of  
\_\_\_\_\_ (print child's name), release The Humane Society of Lebanon County from all responsibility in the event of an accident while serving as a volunteer. I understand that they may not have direct contact with the animals.

Parent/guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

You will be contacted in the next few weeks to set up your orientation. We usually run one orientation per month and have a limited number of spaces in each. You may contact Maria Bojarcheck ([MBojarcheck@lebcnty.org](mailto:MBojarcheck@lebcnty.org)) or Michelle Wyles-Herbert ([mwh.adopt@gmail.com](mailto:mwh.adopt@gmail.com)) with any questions.