



CITY OF SUGAR LAND

Animal Services - Volunteer Contract

By applying for and performing this volunteer work, I agree as follows and have initialed each item to indicate that agreement:

_____ I understand there are risks and dangers associated with working with wild, feral, and domesticated animals, including but not limited to, bites, scratches, zoonotic diseases (diseases transmitted from animals to humans), and allergic reactions. I also understand there may be risks involved with exposure to certain chemical cleaning products while performing my volunteer duties. I fully understand and accept those risks and dangers.

_____ I fully assume all the risks involved with my volunteer activities, and acknowledge that they are acceptable to me. I agree to use my best judgment in undertaking these activities. I also agree to follow the rules and safety instructions as given by the City and volunteers authorized to act in a supervisory capacity, if any.

_____ I understand that I need to show up for my shifts on time. If I cannot make a shift, I understand I need to cancel online within 24 hours of my shift. I understand that I may be give inactive status if I do not volunteer for a minimum of 12 hours per year.

_____ I agree to conduct myself in a courteous and professional manner as a volunteer and as a representative of the City and its Animal Services Division. I may gain access to information about the City's customers, staff, or policies that are confidential and I agree to maintain that confidentiality.

_____ I agree that I will not engage in any unsafe, illegal, or unethical activities while acting as a volunteer for the City and its Animal Services Division.

_____ I agree to abide by all the City's policies and procedures, specifically those of its Animal Services Division. I further agree to support the mission and objectives of the City's animal shelter.

_____ I am 14 years of age or older.

_____ If injured while volunteering I understand I must notify a staff member immediately. I authorize the City to contact my emergency contact and to seek emergency medical care in case of an accident, injury, or illness.

_____ I hereby allow the City of Sugar Land to use any photographs taken of me on property or at special events for public relation purposes. I consent to and authorize, in advance, such use and agree that the City does not have to notify me of such or provide me with other consideration for such use. I waive any rights of privacy and/or publicity I may have in connection with these uses.

_____ I agree that my services are provided on a volunteer basis without pay or compensation of any kind and all services are to be performed at my own risk and that I may be let go as a volunteer at any time.

_____ I understand that I have a particular job assignment when volunteering and that I need to stay on task. I agree to follow the rules and not undertake duties not in my job assignment unless asked by a staff member.

_____ I understand that violations of this contract may result in termination of my volunteer status.

I HAVE CAREFULLY READ THIS VOLUNTEER CONTRACT AND SIGN IT OF MY OWN FREE WILL. If I am under 18 years of age, my parent or legal guardian has completely reviewed this Volunteer Contract, understands and consents to its terms, and authorizes my participation.

Printed Name of Volunteer: _____

Volunteer Signature: _____

Date: _____

Printed Name of Parent or Guardian: _____
(if applicant in under the age of 18)

Parent or Guardian Signature: _____
(if applicant is under the age of 18)

Date: _____