



DIGHTON POLICE DEPARTMENT  
Office of Animal Control  
1458 Somerset Ave.  
Dighton, MA 02715  
Phone: 508.669.6711



**VOLUNTEER APPLICATION**

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

Are you over 18? ☐ Yes ☐ No If No, Age? \_\_\_\_\_

Street Address, City, State

\_\_\_\_\_

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

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

E-Mail Address: \_\_\_\_\_

Why do you want to volunteer? (If you need to volunteer for service hours, community service, etc. please specify).

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

Have you ever volunteered with any organization before? (If yes, please specify which organization and in what capacity).

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

Do you have any animal related experience? (If so, please describe).

\_\_\_\_\_

Do you have any specific skills or training? (Does not have to be animal-related).

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Have you ever received a Rabies Vaccination? ☐ Yes ☐ No

Do you currently have Health Insurance? ☐ Yes ☐ No

Have you ever been charged or accused of any crimes in the past 7 years? ☐ Yes ☐ No (If yes please describe)

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What days and times are you available to volunteer at the Dighton Animal Shelter?

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The Dighton Animal Shelter is managed by Dighton Animal Control who serves under The Dighton Police Department and as an animal care agent for the Dighton Board of Health. We are committed to nurturing and promoting the animal-human bond and creating a community where our relationship with companion animals is guided by compassion. Our dedication and commitment is achieved through adoptions, community awareness, fostering and caring for companion animals until loving homes can be found. We promote awareness and responsible ownership and are committed to giving abandoned, fostered and surrendered animals looking for a second chance in life.

*For DAS/ACO use only:* \_\_\_\_\_

*App reviewed by:* \_\_\_\_\_

*App cleared by:* \_\_\_\_\_

*All waivers signed:* \_\_\_\_\_

### **Volunteer Agreement**

I, \_\_\_\_\_ agree to the following terms and conditions intending to be legally bonding to them. I will abide by the rules, regulations, policies and programs of the Dighton Animal Shelter while I am a volunteer. I will not engage in any unsafe, illegal, or unethical activities while acting as a Dighton Animal Shelter volunteer. As a condition of volunteering, which I acknowledge to be adequate consideration, I also agree to enter into an additional confidentiality agreement as well as a waiver of liability with this volunteer agreement. The above conditions have been reviewed with me and I understand that failing to uphold them is sufficient grounds for The Dighton Animal Shelter to request and implement my removal as a volunteer.

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

Parent/Guardian Signature (if under 18) \_\_\_\_\_

### **Confidentiality Agreement**

Information concerning the management and operation of our organization is generally not known to the public and should be kept confidential. The following guidelines have been developed for this purpose. Guidelines for protecting confidentiality. Confidential information should only be shared with those inside the organization whose jobs require them to have access to the information or when the law requires or protects the release of such information. Town employees or volunteers should not disclose sensitive or non-public information to people outside the organization or discuss it in public places. Documents containing sensitive information, including information stored on computer systems, should be handled carefully and must be properly stored. I have read and understand the above and agree to comply with Dighton Animal Shelter Confidentiality Agreement.

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

### **Liability Release Waiver**

I recognize that while performing my services in a voluntary capacity in handling animals there may be a risk of injury. On behalf of myself, my heirs, and personal representatives I hereby release and hold harmless Dighton Animal Shelter, the Town of Dighton, its agents, and employees from any and all claims, causes of action or demands of any nature or cause connected to my volunteer service. I also agree to release and hold Dighton Animal Shelter harmless for any and all damages to my personal property while performing my volunteer services. If I am signing this release form as a parent or legal guardian of a minor volunteer (under 18 years of age), I hereby give my consent to allow my child to volunteer services for The Dighton Animal Shelter. I agree to hold Dighton Animal Shelter harmless for any claim, loss, or injury incurred by such child. I acknowledge that I have read and fully understand the terms and conditions of the foregoing liability release waiver.

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

Parent/Guardian Signature (if under 18)\_\_\_\_\_