



**animal protection league**  
JOHNSTON COUNTY

**THANK YOU** for your interest in volunteering with the Johnston County Animal Protection League. Volunteers play a vital role within our organization. Without your support, we would not be able to assist nearly the number of animals who need help in our community.

Please complete the Adult/Minor Volunteer Application below. Select the volunteer activities that most interest you. Please print your responses clearly. And again, thank you for your interest in the JCAPL.

Name \_\_\_\_\_ Date \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Please list any children that would accompany you to the events below with age:

Name \_\_\_\_\_ Age \_\_\_\_\_  
Name \_\_\_\_\_ Age \_\_\_\_\_  
Name \_\_\_\_\_ Age \_\_\_\_\_

Do you have experience working with animals? No Yes If yes, please describe:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe any present or previous volunteer work you have done:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have pets? No Yes Dogs Cats Other

**Please check the volunteer opportunities you would like to participate in:**

- Community Outreach
- Adoption Events
- Fundraising
- Public Events for Families and Their Pets
- PetSmart Luv-A-Pet Center for Cats
- Humane Education

Fostering

Spay/Neuter Program

List any other areas of interest not listed above: \_\_\_\_\_

**Please check the animals you are comfortable handling and working with:**

Small/Med Dogs      Med/Large Dogs      Puppies      Cats      Kittens

**Please indicate the time(s) you are available to volunteer:**

Monday \_\_\_\_\_ Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_ Thursday \_\_\_\_\_  
Friday \_\_\_\_\_ Saturday \_\_\_\_\_  
Sunday \_\_\_\_\_

Many times we need help transporting animals to and from special events, adoption events, veterinarian appointments, etc. Do you have a valid North Carolina Driver's license?    Yes    No

How did you hear about the volunteer opportunities with the Johnston Co. Animal Protection League? \_\_\_\_\_

**MEMBERSHIP WITH JCAPL**

If you are not officially a member of JCAPL we are encouraging you to do that now. The monetary amount will be solely used for the animals. Membership fees are waived for Volunteers that work a minimum of five hours a month for JCAPL.

\_\_\_\_\_ \$25 Individual                      \_\_\_\_\_ \$35 Family  
\_\_\_\_\_ \$15 Student                         \_\_\_\_\_ \$15 Senior Citizen  
\_\_\_\_\_ \$50 Patron                            \_\_\_\_\_ \$100 Guardian  
\_\_\_\_\_ \$500 Sponsor                        \_\_\_\_\_ \$1000 or more Benefactor

**The following waiver must be signed by all Volunteers and their legal guardian if the Volunteer is under age 18. Volunteers under 14 requires Guardian present. We reserve the right to deny any Volunteer that does not follow instructions.**

**RELEASE OF LIABILITY AND INDEMNITY AGREEMENT**

For and in consideration of a Volunteer being allowed to work with animals from JCAPL, I, the above-named Volunteer hereby fully and forever release, discharge, acquit and exonerate JCAPL, its volunteers, affiliates and all others acting on its behalf, as the context permits, from any and all claims, actions, causes of action, remedies and complaints of any kind

which I have or may in the future have, whether known or unknown, arising out of or relating to the animals or my volunteer work for JCAPL, including specifically all claims for personal injury, paralysis, wrongful death, property damage and all claims resulting from any injury inflicted by the animals.

I recognize and accept all risks associated with unpredictable animal behavior on behalf of me or any minor of who I am Guardian. I specifically assume all risks arising out of or relating to the care and handling of the animals. I recognize that JCAPL and/or its agents, volunteers, or affiliates make no representations whatsoever as to the past history of the animals and whether or not they are safe animals.

I agree to defend, indemnify and hold harmless JCAPL from any and all claims and costs, including attorney fees, arising out of or relating to the animals.

**I have read the foregoing and voluntarily agree to the terms set out above and so indicate by signing and dating the appropriate place below.**

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**Volunteer signature**

**Guardian signature (if applicable)**

**Date**

**Please return original application and check to the below address:**

Johnston County Animal Protection League

PO Box 607

Smithfield, NC 27577

919-989-7601