



St. Tammany Parish

Animal Services

31078 Hwy 36 Lacombe, La 70445
Phone: (985) 809-0183 Fax: (985) 871-4507
e-mail: animalshelter@stp.gov.org

Michael B. Cooper
Parish President

VOLUNTEER APPLICATION

Thank you for your interest in volunteering with St. Tammany Parish Dept. of Animal Services (STPAS)! 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 Volunteer Application below (you must be over 18 years of age to participate in the program, without a parent or guardian present). Select the volunteer activities that most interest you. Specifics about each volunteer activity will be discussed further in the orientation. Depending on the activities you choose, additional training may be required. You will be contacted to sign up for an orientation class. Please print your response clearly. Thank you again for your interest in helping STPAS shelter animals. (Personal information is for STPAS use only.)

Date _____

Name _____ Age _____

Address _____

City, State, Zip _____

Home Phone # _____ Cell Phone# _____

E-mail Address _____

Emergency contact _____

Relationship _____ Primary phone # _____

Please list any minors (under 18) that you would like to accompany you while volunteering:

Name _____ Age ____ Relationship _____

Name _____ Age ____ Relationship _____

Name _____ Age ____ Relationship _____

Name _____ Age ____ Relationship _____

Name _____ Age ____ Relationship _____

Name _____ Age ____ Relationship _____

Are you currently enrolled in high school or college? ___ yes ___ no

*If yes, will you be volunteering for community service/ internship hours? ___ yes ___ no

Number of hours needed: _____

Please choose your area(s) of interest from the following list:

Dog walking Dog socializing Cat socializing Cage cleaning Events

Medical assistant Fostering Grooming Photos Adoption assistant

Other (please specify) _____

Please list the days and times that you are available to volunteer: _____

Please list volunteer experience, with other organizations: _____

Please provide any additional skills you may have that will assist us in finding specialized positions for you in our volunteer program: _____

Have you volunteered with STPAS in the past? yes no

*If yes, when? _____

Do you have pets? yes no

Do you have experience working with animals? yes no

*If yes, please describe: _____

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

Small/Med Dogs Med/Large Dogs Puppies Kittens

Rabbits, Guinea Pigs or other small animals Livestock Reptiles

I give permission to STPAS to verify any information given above.

Signature of Volunteer (Parent/Guardian, if for a minor)

Date

ST. TAMMANY PARISH
DEPARTMENT OF ANIMAL SERVICES
VOLUNTEER RELEASE FORM

I, _____, hereby agree to accept a position as a volunteer worker for St. Tammany Parish Department of Animal Services (hereinafter referred to as “STPAS”), and in so doing, I agree to comply with all of the policies, rules, and regulations which may be established from time to time by STPAS. I understand that failure to do so may result in my immediate termination as a volunteer.

I acknowledge that my services are provided strictly on a volunteer basis, without any pay or compensation of any kind, and without any liability of any nature on behalf of STPAS, all services to be performed by me at my own risk.

Animal Services promotes communication that is respectful, honest, and direct. Understanding that there are different philosophies, opinions, and views, it is essential that we treat one another with respect and dignity and be accountable for a standard of transparency and disclosure. Animal Services embraces ethical communication and respectful public discussion and opposes efforts that encourage threats, hateful or derogatory language, and mistruths. These behaviors are unprofessional, divisive, and harmful to the collective mission and will cause this agreement to be immediately terminated with or without notice.

I recognize that in handling animals and performing other volunteer tasks, there exists a risk of injury including physical harm caused by the animals. On behalf of myself, my heirs, personal representatives, and executors, I hereby release, discharge, indemnify and hold harmless STPAS, its agents, servants and employees from any and all claims, causes of action, or demands of any nature or cause, including costs and attorney’s fees incurred by STPAS in connection with the same, based on damages or injuries which may be incurred or sustained by me in any connection with my services for STPAS, including, but not limited to, animal bites, accidents, or injuries.

Signature of Volunteer (Parent/Guardian, if for a minor)

Date

STPAS Witness

