



Humane Society
of Central Oregon

HSCO Group Volunteer Application

Download this form, fill out completely, and email to kristin@hsco.org

Once we receive this completed application form, we will reach out with next steps.

Name of Organization/Group: _____

Primary Contact: (one individual will be the primary contact for scheduling & application purposes)

Contact Name: _____ Phone Number: _____

E-mail address: _____

Please Check One:

☐

One-Time Volunteering

☐

Ongoing Volunteering

What ages does your group consist of?

☐

Youth

☐

Adults

☐

Both

Would you prefer your group to volunteer at the shelter or thrift store?

☐

Shelter

☐

Thrift Store

☐

Both

Please describe your group: (what is your organization/school and what do you do?):

What do you want your group to gain from their volunteer experience at HSCO?

Why did your group choose HSCO for their group volunteer experience?

Group Demographics

Please describe the people in your group in regards to mental, physical and emotional abilities. We will use this information to help guide your volunteer service:

Does anyone in our group have a sensitivity to loud sounds, lights, strong smells, new surroundings and/ or new people?

☐

Yes

☐

No

if yes, please explain:

Does anyone in your group need any special accommodations? If so, please explain.

How many people will be volunteering in your group at HSCO? _____

If your group consists of primarily youth, can you provide one adult supervisor per 3 youth?

Does anyone in your group have a criminal history? ☐ Yes

☐

No

If yes, please explain:

Please list dates and times you are hoping for your group to come in. If these dates and times do not work for HSCO, we will work with your group to find an alternative.



Humane Society
of Central Oregon

Humane Society of Central Oregon

Group Volunteer Release Form

YOU WILL NOT BE ELIGIBLE TO BECOME GROUP HSCO VOLUNTEER(S) UNLESS YOU AGREE TO THE FOLLOWING STATEMENT AND INDICATE SO BY SIGNING AT THE END OF THE STATEMENT.

The sponsoring organization will be required to provide HSCO with proof of liability insurance covering the group's volunteer activity. The proof for insurance coverage [a certificate of insurance (COI) signed by a licensed agent representative of the insurance company] must be current and submitted with the project application or prior to any group project activities. The COI is for general liability in the amount of \$2,000,000 per occurrence, and name Humane Society of Central Oregon as additionally insured.

The sponsoring organization shall indemnify, defend and hold HSCO harmless for any loss, bodily injury, or damage incurred by the sponsoring organization and/or group members, and/or the result of the sponsoring organization's or group's actions or conduct.

The sponsoring organization shall be responsible at all times for the actions, character, control, supervision and conduct of the group volunteers. The sponsoring organization understands that any volunteer conduct or pattern of conduct that would tend to disrupt, diminish or otherwise jeopardize the public trust in HSCO shall result in removal of the group from volunteer activities.

The group leader must maintain a list of all group volunteers containing names, addresses and ages, emergency contact; and provide a copy to HSCO.

All group activities will be assigned projects. The designated group leader will be responsible for the project completion and supervision of the group members.

I acknowledge that volunteer photographs may be taken for possible use in: news releases, internal publications, promotional and educational materials.

To the best of my knowledge I have answered everything on this application truthfully and have not given any information intended to deceive or commit fraud or made any false statement that might be construed as such. I acknowledge that I have signing authority for my organization. Applications will be kept on file for 1 year.

Printed Contact Name: _____

Contact Signature: _____

Date: _____

Organization Name: _____