

# Individual Project Request

Created for individuals who want to perform a service project with a set number of hours. This program allows people to help the animals and/or enhance the shelter environment. Adult supervision may be required depending on the age and abilities of the individual requesting the project.

***This form is NOT for use by individuals needing court-ordered community service (CSR). Please contact [info@centraltexasppca.org](mailto:info@centraltexasppca.org) for more information related to CSR requests.***

***Students needing to volunteer because of in-school suspension or other corrective actions should not complete this form. The CTSPCA is unable to provide the type of supervision necessary for these students and are unable to accommodate a request for service hours.***

For more information about this program or to sign-up for a project, send an email with the subject line "Individual Project Request" to [Volunteer@CentralTexasSPCA.org](mailto:Volunteer@CentralTexasSPCA.org) and include the following information:

*Please legibly print all information*

**Name:** \_\_\_\_\_

**Age Range:** \_\_\_\_\_ Over 18    \_\_\_\_\_ 15-17 years old    \_\_\_\_\_ 12-14 years old    \_\_\_\_\_ 5-11 years old

**Contact Phone:** \_\_\_\_\_    **Secondary Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_    **Zip Code:** \_\_\_\_\_

**Reason for Project** (i.e., Eagle Scout, Girl/Boy Scout, School Service, etc...): \_\_\_\_\_

**Number of Hours Needed for Project:** \_\_\_\_\_    **Deadline to Complete Project:** \_\_\_\_\_

If you do not have access to the internet, please submit the information by either dropping it off at the shelter or mailing it to the Central Texas SPCA at:

Drop Off: 909 S. Bagdad, Leander, Texas 78641

Mail: P.O. Box 98, Cedar Park, Texas 78630-0098

Upon selection and approval of a project, a signed parental release form will be necessary for any volunteer participating under the age of 18.

Shelter Use Only	Description of Permitted Duties
Received Date: _____ Shelter Rep: _____	
Scheduled Date: _____ Time: _____	
Shelter Lead: _____	

**Thank you for your interest and support!**

# Volunteer Agreement

## REQUIRED FOR INDIVIDUALS OVER 18-YEARS OF AGE

In consideration of this opportunity to volunteer, I agree to the following terms and conditions, intending to be legally bound by them:

1. I will abide by the mission, rules, regulations, policies and programs of the CTSPCA while I am a volunteer.
2. If I stop being a volunteer for the CTSPCA for any reason, or upon the CTSPCA's request at any time, I will promptly return all of the CTSPCA's supplies, equipment, records, monies and other items in my possession in good, clean condition.
3. **I ASSUME THE RISKS OF BEING FRIGHTENED, BITTEN, SCRATCHED, OR INJURED BY CATS, KITTENS, DOGS AND PUPPIES IN CONNECTION WITH MY VOLUNTEER WORK FOR THE CTSPCA. CTSPCA IS NOT LIABLE TO ME FOR ANY INJURIES, DAMAGES, LIABILITIES, LOSSES, JUDGMENTS, COSTS OR EXPENSES WHATSOEVER, WHICH I MIGHT SUFFER OR SUSTAIN IN CONNECTION WITH THE PERFORMANCE OF MY VOLUNTEER ACTIVITIES FOR THE CTSPCA, UNLESS THEY ARE THE RESULT OF THE CTSPCA'S GROSS NEGLIGENCE OR INTENTIONAL MISCONDUCT. I WILL INDEMNIFY, DEFEND AND HOLD THE CTSPCA HARMLESS FROM AND AGAINST ANY CLAIMS, LAWSUITS, INJURIES, DAMAGES, LOSSES, COSTS OR EXPENSES WHATSOEVER SUSTAINED BY ANY COMPANION ANIMAL OR ANY PERSON IN CONNECTION WITH MY INTENTIONAL MISCONDUCT OR GROSSLY NEGLIGENT PERFORMANCE OF VOLUNTEER ACTIVITIES FOR THE CTSPCA, OR MY BREACH OF CTSPCA'S RULES, REGULATIONS, POLICIES AND PROGRAMS.**
4. I understand and agree that the CTSPCA may refuse volunteer applications for any reason.
5. I understand and agree that the CTSPCA may terminate the volunteer relationship at any time with or without notice.
6. If I will be sheltering or providing foster care or boarding of any of CTSPCA's animals in my home or business, I consent to the CTSPCA visiting my home or business from time-to-time to observe the animals and their living quarters.
7. I have read and understand the CTSPCA's Policies and Procedures and the Volunteer Orientation Handbook.
8. I have accurately and truthfully completed this Volunteer Application and Volunteer Agreement.
9. Any modification to the Agreement must be in writing and signed by both parties. This Agreement is binding upon the CTSPCA, me and my respective heirs, successors, assigns, executors, and personal representatives.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Thank you for your interest and support!**

**Special Service Project Agreement**  
**Permission and Release of Liability**  
**REQUIRED FOR CHILDREN UNDER 18-YEARS OF AGE**

In consideration of this opportunity for my/our child to volunteer at the Central Texas SPCA, I/we have reviewed this Agreement with my/our child and agree to the following terms and conditions, intending to be legally bound by them:

1. My/Our child, or child under my/our guardianship, has my/our permission to volunteer with the Central Texas SPCA and to participate in the selected volunteer project. Such project may include interaction with dogs, puppies, cats and kittens of all sizes.
2. My/Our child will abide by the mission, rules, regulations, policies and programs of the Central Texas SPCA while volunteering.
3. **WHEN MY/OUR CHILD OR A CHILD UNDER MY/OUR LEGAL GUARDIANSHIP PARTICIPATES IN THE ACTIVITY FOR THE CENTRAL TEXAS SPCA, I/WE HEREBY RELEASE AND AGREE TO INDEMNIFY, DEFEND AND HOLD HARMLESS THE CENTRAL TEXAS SPCA, ITS DIRECTORS, OFFICERS, EMPLOYEES, AGENTS AND VOLUNTEERS, AND THEIR HEIRS, SUCCESSORS, AGENTS, AND PERSONAL REPRESENTATIVES, FROM AND AGAINST LIABILITY FOR ANY INJURIES, DAMAGES, LIABILITIES, LOSSES, JUDGMENTS, COSTS OR EXPENSES WHATSOEVER (THE "LOSSES"), WHICH SUCH CHILD OR ANY PET OR OTHER PERSON MIGHT SUFFER OR SUSTAIN, EXCEPT ANY LOSSES WHICH ARE THE RESULT OF THE CENTRAL TEXAS SPCA'S GROSS NEGLIGENCE OR INTENTIONAL MISCONDUCT.**
4. **I/WE ACKNOWLEDGE THAT THERE ARE RISKS THAT THE CHILD COULD BE BITTEN, SCRATCHED, INJURED OR FRIGHTENED BY THE DOGS, PUPPIES, CATS OR KITTENS AND I/WE ASSUME SUCH RISKS AND ALL ASSOCIATED COSTS.**
5. **I/WE ACKNOWLEDGE THAT THERE ARE RISKS THAT THE CHILD COULD BE SCRATCHED OR INJURED WHILE VOLUNTEERING IN CONNECTION WITH THIS PROJECT FOR THE CENTRAL TEXAS SPCA AND I/WE ASSUME SUCH RISKS AND ALL ASSOCIATED COSTS.**
6. I/We understand and agree that the Central Texas SPCA may refuse this application for any reason.
7. I/We understand and agree that the Central Texas SPCA may terminate this volunteer relationship at any time with or without notice.
8. This Permission and Release of Liability form is binding upon me/us, the undersigned, and my/our respective heirs, successors, assigns, executors, and personal representatives.
9. I/We have accurately and truthfully completed this School/Community Service Agreement and Permission and Release of Liability form.
10. Any modification to the Agreement must be in writing and signed by both parties. This Agreement is binding upon the Central Texas SPCA, me and my respective heirs, successors, assigns, executors, and personal representatives.

Printed Name of Child: \_\_\_\_\_

Volunteer Project: \_\_\_\_\_

Signature of Parent/Legal Guardian: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Parent/Legal Guardian: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Thank you for your interest and support!**