

# Service Project Request

Created for individuals or groups who want to volunteer on a limited basis (one time or up to 8 hours), this program allows people to help enhance the shelter environment to benefit the animals. Adult supervision is required for school-aged individuals/groups. 10 people is the maximum number for a group project. Due to the small size of the shelter and limited parking area, all service project requests must be scheduled during times when the shelter is closed to the public. The shelter is open to the public on Mondays and Fridays from 3 p.m.-7 p.m. and on Saturdays and Sundays from Noon-5 p.m.

*Students needing to volunteer because of in-school suspension or other corrective/disciplinary 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 these types of service hours.*

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

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

*Please legibly print all information*

Individual/Company/Group Name: \_\_\_\_\_

Name of Primary Contact: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

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

Mailing Address: \_\_\_\_\_

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

Reason for Project (i.e., school project, employer outreach program, etc.): \_\_\_\_\_

Number of Hours Requested for Project: \_\_\_\_\_ Deadline to Complete Project: \_\_\_\_\_

How Many in the Group? \_\_\_\_\_ (no more than 10) Is everyone in the group over 18? \_\_\_\_\_

If under the age of 18, age or age range of children: \_\_\_\_\_ *Adult supervision required for groups under the age of 18-years.*

Does your project include a budget for materials or donations to the shelter? \_\_\_\_\_

If so, what is the amount or materials to be donated? \_\_\_\_\_

If you do not have Internet access, please submit the information by 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 release form will be necessary.

Shelter Use Only	
Received Date: _____ Shelter Rep: _____	Date of Group Visit: _____ Number of Participants: _____
Assigned Shelter Lead(s): _____	Start Time: _____ End Time: _____
Event Added to Shelter Calendar by: _____	Total Hours: _____
Description of Project(s) to be Done:	

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

Individual/Group Project Name: \_\_\_\_\_ Date of Project: \_\_\_\_\_

The Volunteer Agreement is to be signed on the day of the project at the shelter.  
Parental Release forms are required for anyone under 18-years of age.

## Volunteer Agreement

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 Central Texas SPCA while I am a volunteer.
2. I have enough experience with dogs and cats to volunteer with the Central Texas SPCA and to participate in activities with dogs, puppies, cats and kittens of all sizes.
3. **I ASSUME THE RISKS OF BEING BITTEN, SCRATCHED, INJURED, OR FRIGHTENED BY CATS, KITTENS, DOGS AND PUPPIES IN CONNECTION WITH MY VOLUNTEER WORK FOR THE CENTRAL TEXAS SPCA. CENTRAL TEXAS SPCA 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 CENTRAL TEXAS SPCA, UNLESS THEY ARE THE RESULT OF THE CENTRAL TEXAS SPCA'S GROSS NEGLIGENCE OR INTENTIONAL MISCONDUCT. I WILL INDEMNIFY, DEFEND AND HOLD THE CENTRAL TEXAS SPCA 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 CENTRAL TEXAS SPCA, OR MY BREACH OF CENTRAL TEXAS SPCA'S RULES, REGULATIONS, POLICIES AND PROGRAMS.**
4. **I 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 I 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.**
5. **I ACKNOWLEDGE THAT THERE ARE RISKS THAT I COULD BE BITTEN, SCRATCHED, INJURED OR FRIGHTENED BY THE DOGS, PUPPIES, CATS OR KITTENS AND I ASSUME SUCH RISKS AND ALL ASSOCIATED COSTS.**
6. I have accurately and truthfully completed this Permission and Release of Liability form.
7. This Permission and Release of Liability form is binding upon me, the undersigned, and my respective heirs, successors, assigns, executors, and personal representatives.
8. I understand and agree that the Central Texas SPCA may terminate the volunteer relationship at any time with or without notice.
9. Any modification to this 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: \_\_\_\_\_  
Email address: \_\_\_\_\_

\_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Email address: \_\_\_\_\_

\_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Email address: \_\_\_\_\_

\_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Email address: \_\_\_\_\_

\_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Email address: \_\_\_\_\_

\_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Email address: \_\_\_\_\_

\_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Email address: \_\_\_\_\_

\_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Email address: \_\_\_\_\_

\_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Email address: \_\_\_\_\_

\_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Email address: \_\_\_\_\_

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

Parental Release forms are required for anyone under 18-years of age.

## 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 Service Project 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!**