



# sean casey animal rescue

A 501(C)(3) NON-PROFIT, NO-KILL SHELTER

Specializing in the rescue, rehabilitation and placement of dogs, cats, reptiles, amphibians, birds and small mammals.

## CORPORATE GROUP VOLUNTEERING APPLICATION

Complete and return this form to:  
E-mail: [volunteer@nyanimalrescue.org](mailto:volunteer@nyanimalrescue.org)

OFFICE USE ONLY	
Date Rec'd	

Name/Trade Name of Company:

Address:

City/Town: State: Zip Code:

Phone:

### Contact Information

Full Name of Contact Person:

Title:

Phone:

E-mail:

### Alternate Contact Information

Full Name of Contact Person:

Title:

Phone:

E-mail:

Approximately how many people are in your group?

### DATES / DAYS REQUESTED:

Days/Times	Indicate your preferred SCAR location(s):
	Windsor Terrace 153 E 3 <sup>rd</sup> St, Bkln NY 11218 *TUESDAY THRU FRIDAY

I acknowledge that the above information is correct and true to the best of my knowledge, and that I have read and agreed to the liability agreement on the following page.

SIGNATURE OF GROUP REP: \_\_\_\_\_ Date: \_\_\_\_\_



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# SCAR CORPORATE GROUP VOLUNTEER PROGRAM WAIVER & AGREEMENT

## Liability Release (A)

1. We agree to volunteer our time and talents to assist the Sean Casey Animal Rescue, Inc. (SCAR) in carrying out its mission.
2. We understand that we will not receive any monetary compensation and that we are not eligible for any benefits offered to SCAR employees.
3. We understand that while on duty and performing functions authorized by SCAR, we are not covered for accident insurance and liability insurance. We accept responsibility for the individual's or group's private insurance.
4. We understand that with proper notification (24 hours) either our group or SCAR may cancel this agreement at any time.
5. We agree to:
  - 5.1. Complete the duties that we agree and are assigned to do to the best of our ability.
  - 5.2. Arrive on time and notify staff when we are unable to work the shift or hours we had planned.
  - 5.3. Be courteous and respectful to the public, volunteers, and staff.
  - 5.4. Abide by the laws of New York State and SCAR policies, rules and regulations.
6. SCAR agrees to:
  - 6.1. Provide necessary training to do our assignments.
  - 6.2. Provide a safe working environment

## Confidentiality Statement (B)

As a volunteer for the Sean Casey Animal Rescue, Inc., I acknowledge that I may have access to confidential and privileged information and materials obtained through my affiliation with the Sean Casey Animal Rescue, Inc. I shall not share any such information or materials with anyone within or outside the organization not intended to receive them.

## Consent and Release for Publication of Photographs (C)

I, the undersigned, hereby grant the Sean Casey Animal Rescue, Inc., permission to take photographs of me, and irrevocably consent to and authorize the use and reproduction by the Sean Casey Animal Rescue, Inc., or anyone duly authorized by the Sean Casey Animal Rescue, Inc., of any and all such photographs, for any legitimate purposes, including for advertising, trade, and editorial purposes, at any time in the future in all media now known or hereafter developed. I also consent to the use of my name in connection with such photographs. I hereby release, indemnify and hold harmless the Sean Casey Animal Rescue, Inc. and its officers, directors, agents and employees from any and all claims which may result at any time by reason of the use of my image and name, including, without limitation, claims or privacy. My heirs, executors, administrators and assigns shall be bound by this consent and release. I am over the age of 18.

\_\_\_\_\_  
**Name (please print)**

\_\_\_\_\_  
**Signature**

## Section A — Notice of Occurrence, Claim or Suit

In cases of emergency, the affected party should dial 911 immediately.

When an occurrence takes place the affected person shall immediately notify the Sean Casey Animal Rescue, Inc. Director of Operations (347-599-1500 - operations@nyanimalrescue.org) of any accident or loss and forward all notice and legal papers received.

Notice shall be given immediately after the person has knowledge of the occurrence. It shall include all reasonably obtainable information about the time, place and circumstances of the occurrences as well as the names, addresses, telephone numbers and other pertinent information of all individuals involved.

No person shall, except at individual expense, voluntarily make any payments, assume any obligation or incur any costs.