



**APPLICATION FOR VOLUNTARY WORK**

TEL: 012 8035219 - FAX: 012 803 5775 - [admin@spcapta.org.za](mailto:admin@spcapta.org.za)

**BEFORE COMPLETING THIS FORM, IT IS COMPULSORY THAT YOU HAVE TO HAVE YOUR ANTI-TETANUS INOCULATION UP TO DATE. PLEASE CONSULT YOUR GP FOR THIS VACCINATION.**

**PERSONAL INFORMATION OF THE VOLUNTEER (“the Volunteer”)**

Title:		Date of Application:	
Surname:		First Name:	
ID Number:		Cell No:	
e-mail Address:			
Physical Address:			
Emergency Contact:		Cell No:	

**PERSONAL INFORMATION OF THE PARENT OR LEGAL GUARDIAN – VOLUNTEERS UNDER THE AGE OF 18 YEARS**

(In the event that the Volunteer is under the age of 16 years they must be accompanied by an adult at all times)

Title:			
Surname:		First Name:	
ID Number:		Cell No:	
e-mail Address:			
Physical Address:			

**VOLUNTEERING INFORMATION**

Regularity:	Week days/Weekends/Holidays/Anytime
If weekly, please specify which days & times:	
Which Branch:	Waltloo / Centurion
Previous Volunteering Experience:	

**VOLUNTEERING PREFERENCES**

CLINIC	VET STUDENTS ONLY	KENNELS		CLEANING	
FUNDRAISING		SCHOOL		GARDENING	
PROJECTS		PROJECTS		MAINTENANCE	

*The assignments of volunteer tasks remain in the sole discretion of the Tshwane SPCA management – not all volunteer tasks are appropriate for all ages. Please work with us to ensure the best experience for both yourself and the Tshwane SPCA when volunteering.*

**ALL VOLUNTEERS TO CONFIRM BOOKINGS IN ADVANCE**

**INDEMNITY**

The SPCA Tshwane and/or its directors, management, members, agents, employees and/or representatives (“the Indemnified Persons”) will not accept any responsibility and cannot be held liable for any injury or loss suffered by the Volunteer. By their signature below, or that of their parent or guardian where relevant, they (and their parent or guardian, where relevant) recognise and accept that participation in volunteer activities at or through the SPCA Tshwane involve a certain amount of risk, both foreseeable and unforeseeable. Whilst reasonable care is taken by SPCA Tshwane to manage and minimise the risk, the Volunteer (and their parent or guardian, where relevant) undertakes to release and to discharge the Indemnified Persons from all liabilities, claims, costs, charges and expenses, for any accident, injury, loss or damage (collectively referred to as “Risk Incidents”) whether directly or indirectly that may occur in the course of, or as a result of participating in volunteering activities at or through the SPCA Tshwane. No persons may accompany the Volunteer without prior approval from SPCA Tshwane management. Persons accompanying the Volunteer shall be required to also complete and sign this indemnity. The onus is on the Volunteer to ensure that this is done. The Volunteer agrees to observe all safety and security regulations and policies as prescribed by the SPCA Tshwane. The volunteer may be subject to searches of person and belongings for security and safety reasons. The Volunteer must sign the volunteer book and wear volunteer identification (as provided by the SPCA Tshwane) whenever they volunteer. The Volunteer is not permitted to assess/diagnose/advise the general public on issues regarding veterinary conditions or the general health or wellbeing, availability or status of any animal in the care of the SPCA Tshwane and must refer enquiries to a member of staff. The Volunteer is not permitted to enter the SPCA Tshwane premises outside normal working hours. The Volunteer may not take photos/videos without permission. In general, once-off or short-term volunteers will be assigned cleaning, gardening and maintenance tasks. I the undersigned, have read and acknowledge and agree to the above indemnity and conditions as well as any other conditions related to the specific tasks relevant to the section in which I will be volunteering.

NAME AND SURNAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

(Parent or guardian to sign in the case of minor children)

DATE: \_\_\_\_\_

On request this document can be explained in Zulu, Sotho & Afrikaans