



Student Volunteer Agreement

This agreement is made and entered into on _____ by and between the New Hampshire Society For The Prevention of Cruelty To Animals, a not-for-profit corporation (hereinafter referred to as the “NHSPCA”), and _____ (hereinafter referred to as the “Student Volunteer”)
Full Name

In consideration of the mutual promises and covenants herein contained, the parties hereby agree as follows:

1. The Student Volunteer agrees to abide by all NHSPCA policies and procedures
2. The Student Volunteer agrees to participate in and satisfactorily complete a NHSPCA training program, if requested by the NHSPCA Manager of Humane Education Programs or Humane Educator.
3. The Student Volunteer agrees to be supervised by the NHSPCA Manager of Humane Education Programs or Humane Educator.
4. If an accident or injury occurs while the Student Volunteer is fulfilling his/her responsibilities, the NHSPCA is authorized to seek emergency medical treatment on the Student Volunteer’s behalf. Student Volunteers may receive coverage of medical expenses, but are not covered under the NHSPCA’s life, accident and disability insurance.
5. The Student Volunteer does not have, nor shall he/she hold himself out as having any right, power, or authority to create any contract or obligation, either express or implied, on behalf of, in the name of, or binding upon the NHSPCA.
6. The Student Volunteer agrees to hold the NHSPCA harmless from any and all claims, damages, and causes of action, including attorney’s fees arising from services rendered by the Student Volunteer.
7. The Student Volunteer agrees to keep confidential all information acquired in the course of voluntary services rendered both during the time Student Volunteer is a Student Volunteer at the NHSPCA and thereafter.
8. The Student Volunteer understands that he/she may at any time, with or without cause, be removed from the position as a Student Volunteer at the sole discretion of the NHSPCA.

Student Volunteer Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Authorized NHSPCA Signature: _____ Date: _____