



Isle of Wight County Humane Society
P.O. Box 273, Smithfield VA 23431
(757)357-4214
info@iowchs.org

Membership Application

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

The primary purpose of this organization is the education and support of the community concerning responsible ownership of companion animals with special emphasis on rehabilitation and care of animals in need. The secondary purpose of this organization is to assist county residents with spay/neuter, medical grants, and managing feral cat colonies.

Below are some areas that volunteers are always needed.
Please indicate any that you may be interested in.

- Foster animals until adopted (Please request a Pet Foster Application).
- Assist during fundraising events
- Clean cat cages
- Trap/Neuter/Return (TNR) feral cats

Please indicate below any previous animal group experience or other experience/activities that you are interested in. _____

Have you or anyone residing at this address ever been convicted of or violated State or local ordinances for cruelty, neglect or abandonment of animals? YES NO

Liability Waiver

I the undersigned hereby release, indemnify, and hold harmless Isle of Wight County Humane Society, its officers or members from any and all liability, claims, demands, actions, and causes of action (including claims for court costs and attorney's fees) whatsoever arising out of or related to any loss, damage or injury, including death, that may be sustained by me/us or to any property belonging to me/us as a result of Isle of Wight County Humane Society membership. I understand that I am a member at my own risk and can decline to accept the membership.

Printed Name _____ Signature _____ Date _____

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Date Application received: _____ Approved Date: _____
Paid (\$25.00): _____