



Dear Jr Camp Counselor Parent/Guardian,

Thank you for taking this first step to becoming a volunteer Jr Camp Counselor with the Humane Society of Sonoma County. The Jr Camp Counselor program offers teens an opportunity to volunteer at the Humane Society in our youth camp programs we offer during the summer and winter break.

The Humane Society generally requires volunteers to be 18 years of age or older. However, we are able to extend this opportunity and privilege of joining our teams as Jr Camp Counselors in our Humane Education Animal Adventure & Education Camps and Farm camps to mature, responsible, enthusiastic and highly committed students to high school students of junior and senior class levels.

This important responsibility includes helping camp staff prepare and run our youth camps, assisting campers with activities and interaction with shelter animals, providing assistance to staff and youth campers to enhance their camp experience and most importantly engaging with our young campers!

The High School Volunteer Program provides many opportunities to learn more about animals, help care for animals at our shelter, meet other teens interested in companion animals and explore the field of animal welfare and shelter veterinary medicine. The program fosters leadership, team work, animal handling and inter-personal communication skills. Participants will gain experience managing and teaching children while learning about child development and teaching careers. Many previous camp attendees have grown into being Jr Camp Counselors and followed careers in veterinary science, teaching, special education, animal control officer, and other professional fields. We are proud to have been part of the lives of young people during their childhood, teens and young adulthood as they follow their interests and ambitions while gaining valuable work experience through their volunteerism with the Humane Society!

Our main focus at Animal Adventure & Education Camp is that all campers learn, have fun and are safe while doing so.

Requirements: Interested Candidates will have the enthusiasm and ability for the following skills:

- Mature, safe, responsible, and professional comportment
- Excellent listening and communication skills
- Enjoy working with elementary age children with a variety of abilities
- Enjoy and be safe working with a variety of animals
- Enjoy engaging with youth with a variety of abilities and personalities.
- Outgoing, interactive and social with children— children are very interactive and enjoy talking and being with teen counselors
- Leadership skills – be comfortable being a positive role model for children
- Team Player – be able to work as a team with fellow Jr Camp Counselors, Camp Staff, Humane Society staff and volunteers.
- Respectful and thoughtful communication with fellow volunteers, staff, animals, and general public
- The ability to follow multiple directions and work independently
- Take initiative, work without direct supervision at time
- Time Management
- Respects and follow directions and the Humane Society's safety protocols and policies
- Comfortable and willing to clean up after animals when needed
- Generosity and enthusiasm, embracing the array of responsibilities associated with animal care and with being a contributing member of a team
- Kindness, compassion, and patience for all people and animals

Sincerely,

Kathy Pecsar

Humane Educator

[kpecsar@humanesocietysoco.org](mailto:kpecsar@humanesocietysoco.org)

(707) 577-1902



Please come prepared with a brown bag lunch (no microwaveable lunches) and a water bottle and sun protection.

**Cell phone use is not permitted during camp hours when working with the children.**

Dress code during camp:

Long legged pants, no shorts or skirts

A crew cut neckline t-shirt

Closed-toe skid proof sturdy shoes, No sandals, Crocks, high heels, ballet slippers or flip-flops please!

Clothes & shoes you don't mind your child getting dirty, stained or wet.

Please provide a light jacket for chilly mornings.

Please no necklaces, bracelets or large dangling earrings.

### Camp Counselor and Parent/Guardian Contact Information

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Nickname \_\_\_\_\_ Sex M F Grade \_\_\_\_\_ School \_\_\_\_\_

Teen's Age \_\_\_\_\_ Birth date \_\_\_\_\_ Teen phone # \_\_\_\_\_

Parent Email \_\_\_\_\_ Teen Email \_\_\_\_\_

Teen's Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Parent Home Phone \_\_\_\_\_ Parent Cell Phone \_\_\_\_\_

Parent First & Last Name \_\_\_\_\_ Employer Name & Address \_\_\_\_\_

Parent Home Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Second Parent/Guardian First/Last Name \_\_\_\_\_ Second Parent/Guardian Employer Name & Address \_\_\_\_\_

Second Parent Home Address \_\_\_\_\_ Second Parent City/State/Zip \_\_\_\_\_

Second Parent Home Phone \_\_\_\_\_ Second Parent Cell Phone \_\_\_\_\_

Teen Physician Name, Address, and PHONE \_\_\_\_\_

Insurance Career & Number in case of emergency \_\_\_\_\_

Teen's Dentist and Orthodontist Name, Address and Phone \_\_\_\_\_



**PLEASE LIST TWO - THREE EMERGENCY CONTACTS OTHER THAN ABOVE PARENTS/GUARDIANS**

\_\_\_\_\_  
Name Phone Alternate Phone

\_\_\_\_\_  
Name Phone Alternate Phone

\_\_\_\_\_  
Name Phone Alternate Phone

Medical Information (Please circle- IF YES, PLEASE DESCRIBE)

Operations or serious injuries: NO YES \_\_\_\_\_

Disability or Chronic recurring illness: NO YES \_\_\_\_\_

Activities discouraged or limited by physician: NO YES \_\_\_\_\_

Dietary Modifications: NO YES \_\_\_\_\_

Current Medications: NO YES \_\_\_\_\_

Reason for Medication listed above \_\_\_\_\_

Allergies (Please include food, medicine, bug bites, bee stings, etc. \_\_\_\_\_

Asthma: NO YES Is an inhaler needed? NO YES \_\_\_\_\_

Other diseases or medical details? NO YES \_\_\_\_\_

Any psychiatric counseling or hospitalization? NO YES \_\_\_\_\_

Is there anything specific we should know about your child to ensure they safest and most enjoyable environment?

\_\_\_\_\_  
\_\_\_\_\_



Due to the nature of our business, with constant exposure to animals their allergens, our youth education programs are not recommended for children/teens with known allergies. Because of staffing restrictions we may not be able to accommodate special individual needs. Additionally, staff is not permitted to dispense of or administer medicine to camp participants. This is a recreational camp program. The Humane Society of Sonoma County & Forget Me Not Farm Children's Service is not a licensed child care provider.

I have read and understand and agree.

Parent Name \_\_\_\_\_

Parent Signature \_\_\_\_\_

#### Medical History Acknowledgement and Agreement

The health history is correct as far as I know and the person herein described has permission to engage in all prescribed activities as noted. Camp activities do include field trips to locations off the Humane Society of Sonoma County property.

Authorization for treatment: I hereby give permission to the medical personnel selected by the camp director to order diagnostic testing, treatment and necessary transportation for me/my child. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected to secure and administer treatment including hospitalization for my child named above.

#### Learning, Emotional, Behavioral, Cognitive, Physical Challenges and/or Disabilities

So that we can best serve your child please let us know if s/he has any learning, emotional, behavioral, cognitive, physical challenges or disabilities.

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\_\_\_\_\_  
Printed Name of Parent/Guardian

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date



## Tetanus Waiver

The Humane Society of Sonoma County feels it is important for camp participants to be current on their tetanus vaccination, particularly since they'll be handling animals. You are encouraged to consult your physician, at your expense, to decide whether or not to be vaccinated against tetanus.

I have read, understand and agree to the above. Furthermore, I release the Humane Society of Sonoma County and the Forget Me Not Farm Children's Services from all responsibility that may occur because of not being vaccinated against tetanus. I understand that whatever decision I make regarding a tetanus vaccination is my own decision and is made at my own risk.

\_\_\_\_\_  
Printed Name of Parent/Guardian

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

## RABIES WAIVER

While the Humane Society of Sonoma County, vaccinates all dogs and cats against rabies, we feel it is important to be aware that a pre-exposure rabies vaccination series is available. If you have questions, you are encouraged to consult a physician, at your expense, to decide whether or not to be vaccinated.

I have read, understand and agree to the above. I release the Humane of Sonoma County Society and Forget Me Not Farm Children's Services from all responsibility that may occur because of my not pursuing the pre-rabies exposure vaccination series and I understand that whatever decision I make regarding this vaccination is my own decision and is made at my own risk.

\_\_\_\_\_  
Printed Name of Parent/Guardian

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date



**Humane Society of Sonoma County**

**Approval for Surgery Observation / Handling of Medical Instruments**

I, the undersigned, as parent or legal guardian of

\_\_\_\_\_, a minor, for in consideration of the agreement of the Humane Society of Sonoma County do give my approval for said minor to observe surgeries performed on animals (as routine procedures in the veterinary department of the Humane Society of Sonoma County as part of the Education Department curriculum.

\_\_\_\_\_ **Parent Initial**

I also give permission for the above-mentioned child to handle medical instruments during curriculum activities designed to practice veterinary techniques with stuffed animals or other supplies. I understand that latex gloves will be available for my child to wear during such activities. \_\_\_\_\_ Parent Initial

I am aware that said minor may witness blood and internal organs of animals and that the Humane Society staff will do everything reasonably within their power to protect my child from any possible contamination.

I do hereby forever release, acquit, discharge, and hold harmless the Humane Society of Sonoma County, its officers, trustees, agents, employees, representatives, successors and assigns for all manner of claims, demands, and damages of every kind and nature whatsoever which the undersigned or said minor may now or in the future have against the Humane Society of Sonoma County, its officers, trustees, agents, employees, representatives, successors or assigns on account of any personal injuries, physical or mental condition, known or unknown, to the person of said minor and the treatment thereof, as a result of or in any way growing out of the acts of the Humane Society of Sonoma County, its officers, trustees, agents, employees, representatives, successors, or assigns, including but not limited to their negligence or gross negligence, in rendering the services above described or in any way incidental thereto.

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Parent/Guardian Signature

Date



## Standard Photo & Video Release

I hereby irrevocably grant the Humane Society of Sonoma County and the Forget Me Not Farm Children's Services and their legal representatives, and assigns, the following rights:

The right and permission to publish photographic pictures, videos images or portraits made of me through any media and to post it on the internet or through You Tube.

I hereby release, discharge and agree to hold harmless the Humane Society of Sonoma County and photographer, videographer, their representatives, assigns or any corporation(s) acting under the permission of the Humane Society of Sonoma County including any firms publishing or distributing the final product.

I hereby waive the right to approve the finished photograph, video or any copy which might be used in conjunction with the photograph or video.

I understand that I do not own the copyright of the photograph(s) or video(s).

I hereby warrant that I am at least eighteen years of age and am competent to contract on my own name insofar as the above is concerned.

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature of parent of guardian if under 18 years of age

\_\_\_\_\_



## Parental Consent

(Only to be completed if the Participant is under the age of eighteen (18))

Due to the nature of our business, with constant exposure to animals and their allergens, our youth education programs are not recommended for children/teens with known allergies. Participants are expected to be self supporting to participate in all physical and educational activities planned. Because of staffing restrictions we may not be able to accommodate special individual needs. This is a recreational camp program. The Humane Society of Sonoma County is not a licensed child care provider.

I represent that I am the parent/legal guardian of a minor and by my signature below consent to and allow my child/ward to participate in activities with domestic, farm and wild animals of the camps, birthday parties, Apprentice, Mentoring, and/or Jr Animal Attendant programs of the Humane Society of Sonoma County and Forget Me Not Farm Children's Services under the terms and conditions set forth in for youth participants. In addition, I give the Society permission to use and publish photographs of my child/ward, as part of its public relations efforts. I grant the right to photograph, reproduce and use said child's artwork, written work, picture, silhouette and other reproductions of physical likeness in connection with the Humane Society of Sonoma County and Forget Me Not Farm Children's Services promotions.

On behalf of myself and our heirs and personal representatives, I hereby release, discharge, indemnify and hold harmless the Society and its assigns, successors, agents, staff, officers, board of directors, employees, contractors and representatives from any and all claims, causes of actions, or demands of any nature of cause whatsoever, including costs of attorney fees, arising out of or relating to the camp activities with the Society including driving to and from field trips off the property of the Humane Society of Sonoma County, including, but not limited to; animal bites, accidents, or injuries; as well as all injuries, claims or other loss that may incur because of the failure to receive a proper tetanus vaccination.

I agree that all services I will provide are charitable in nature and entirely voluntary and that no compensation of any kind will be received for the participation. Further I have been fully advised that as a non employee I am not covered by workers compensation and that my personal medical insurance takes precedent over any volunteer medical insurance policy from the Humane Society of Sonoma County and Forget Me Farm Children's Services.

I HAVE CAREFULLY READ THIS WAIVER OF LIABILITY, MEDICAL RELEASE AND INDEMNITY AGREEMENT AND FULLY UNDERSTAND THE CONTENTS THEREOF. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE HUMANE SOCIETY OF SONOMA COUNTY AND FORGET ME NOT FARM CHILDREN'S SERVICES AND I SIGN IT OF MY OWN FREE WILL.

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Name of Participant

Age of Participant

Date

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Printed Name of Parent/Guardian

Date

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Signature of Parent/Legal Guardian

Date