

## Is volunteering at The Animal League for you?

You'd be a great **YIP** if you can answer YES to the following questions.



**CORN FLAKES**

1. Could you cheerfully scoop poop and clean litter boxes?
2. Can you follow animal care instructions and ask questions for clarification?
3. Would you like to train a dog to walk well on a leash?
4. Can you live without personal electronic devices for 4 hours?
5. Would you like to learn about the many different personalities and behaviors of cats and dogs?

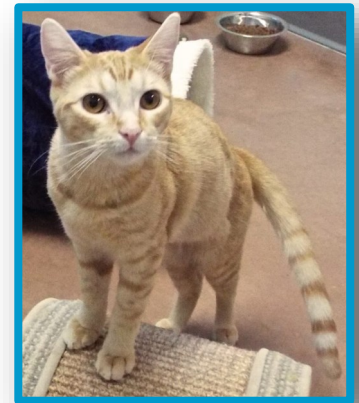
6. Do you enjoy petting, grooming and socializing dogs and cats?

7. Can you enthusiastically do necessary daily chores (i.e. dishes, sweeping, mopping, laundry)?

8. Would you like to feel that you've made a difference by helping homeless dogs and cats?

### As a **YIP**, you will commit to:

- Attend training May 30, May 31 & June 1
- Volunteer 4 hours each week, early OR late shift, for a total of 32 hours
- Work more than one shift a week if you would like
- Notify your coordinator in advance of any absences
- Have your parent/guardian agree to provide transportation



**BELMONT**



# Youth Intern Program (YIP) MAY 30th– JULY 30th 2023 Student Application Form - due MAY 12th

 Please **PRINT** clearly ~ Application **MUST** be readable! 

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

Address: \_\_\_\_\_  
Street Town Zip

Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Email address: \_\_\_\_\_ @ \_\_\_\_\_ . \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
Month Date Year How old are you now?

What would you like to do as a volunteer at The Animal League of Green Valley (TALGV)?

When school starts in August, what grade will you be entering (must be 9 – 12)? \_\_\_\_\_

What school are you attending now? \_\_\_\_\_ What school will you be attending? \_\_\_\_\_

What training/work/home experience do you have, that might be helpful to TALGV?

Have you ever been a YIP before? Yes \_\_\_ If yes, when? \_\_\_\_\_ No \_\_\_

Please describe any of your previous volunteer experiences?

Do you have any medical condition(s) or limitation(s) of which we should be aware?

To participate in the Youth Intern Program, you must be able to work at least one four hour shift a week.

Help us plan your work schedule - talk with your parents/guardians, then complete  
the YIP Scheduling Information Form (attached)

SUBMITTED BY:

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

Return this form to YOUR SCHOOL OFFICE or to TALGV no later than  
**Friday, May 12, 2023**

For more info contact: TALGV at (520) 223-3955 or finallymrsmense@aol.com  
~ This program is neither sanctioned nor sponsored by the Sahuarita School District. ~



# Youth Intern Program (YIP) Parent/Legal Guardian Information and Release Form due by **MAY 12th** YIP program from **MAY 30 to JULY 30, 2023**

Thank you for your interest in The Animal League of Green Valley (TALGV). TALGV is a nonprofit corporation which operates an animal shelter for dogs and cats.

We are offering the **Y**outh **I**ntern **P**rogram to teens who would like to volunteer at TALGV. If your child would like to volunteer he/she needs to have graduated from the 8<sup>th</sup> grade by the end of May 2023 and be under the age of 18 years. We are limiting the number of participants this year. Applications will be accepted on a first-come, first-serve basis. Please read and complete this form, sign it and return it to us. We reserve the right to set different age requirements for different types of volunteer activities.

**\*\*\*PLEASE LEGIBLY PRINT ALL INFORMATION!\*\*\***

Child's name: \_\_\_\_\_ Age \_\_\_\_\_

Your Name: \_\_\_\_\_

Please check one: ☐ parent or ☐ legal guardian

I give permission for this child to participate in TALGV's YIP activities ☐ yes

Your address: \_\_\_\_\_

Your child's address if different from yours: \_\_\_\_\_

Your Home phone # \_\_\_\_\_ Your Cell # \_\_\_\_\_

Your email address: \_\_\_\_\_ @ \_\_\_\_\_ . \_\_\_\_\_

Describe the child's experience with dogs: \_\_\_\_\_

Is the child accustomed to large dogs? ☐ yes ☐ no

Do you presently own or have you owned a dog? ☐ yes ☐ no

What kind? \_\_\_\_\_

Describe the child's experience with cats: \_\_\_\_\_

Do you presently own or have you owned a cat? ☐ yes ☐ no

**Participation Authorization and Release Form for Minors:**

Whenever my/our child, or a child under my/our guardianship, participates in TALGV's activities, I/We hereby release, and agree to indemnify, defend and hold harmless TALGV, its directors, officers, employees, agents, and volunteers, and its and their heirs, successors, assignees, and personal representatives, from and against liability for any injuries, damages, liabilities, losses, judgments, costs or expenses whatsoever, which such child or any pet or other person might suffer or sustain.

☐

I/We acknowledge that there are risks that the child could be bitten, scratched, injured, frightened by the dogs/puppies and/or the cats/kittens and I/We assume such risks.

**Participant Commitment:** We are aware that this is an 8 week commitment (May 30 - July 30) for our child, and we agree to provide transportation to and from TALGV for his/her scheduled volunteer time (a minimum of one 4 hour block per week - accommodating adjustments, if necessary, due to any conflicts with our school district calendar). We are aware that our child must volunteer a total of 32 hours to graduate from this program.

I/We have accurately and truthfully completed this Permission Form.  
This Permission Form is binding upon me, my spouse/partner.

Dated: \_\_\_\_\_

**PARENT/GUARDIAN**

**SPOUSE/PARTNER**

\_\_\_\_\_  
Sign Name

\_\_\_\_\_  
Sign Name

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

**Media Authorization and Release Form for Minors:**

I hereby authorize The Animal League of Green Valley (TALGV) and its agents, licensees, representatives and assignees to copy, exhibit, publish or distribute any and all photographs and likenesses of my child or ward, including those in which he/she appears with other individuals, and recordings of his/her voice, in whole or in part, in all forms and media throughout the world and in perpetuity for purposes of publicizing TALGV and its programs, or for any other ethical and lawful purpose. This includes but is not limited to print, billboard, radio, television, the World Wide Web, social media, and TALGV and other third-party approved publications. Additionally, I waive any right to inspect or approve the finished product, including written copy, in which his/her likeness or voice appears. I agree to notify TALGV in writing if I later revoke this authorization.

Dated: \_\_\_\_\_

**PARENT/GUARDIAN**

**SPOUSE/PARTNER**

\_\_\_\_\_  
Sign Name

\_\_\_\_\_  
Sign Name

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

**Return this form to your school office or to TALGV no later than**

**Friday, May 12, 2023**

**For more info contact: TALGV at (520) 223-3955 or [finallymrsmense@aol.com](mailto:finallymrsmense@aol.com)**



# YIP Scheduling Information Form

## For May 30 – July 30, 2023

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

Address: \_\_\_\_\_  
Street Town Zip

Your Cell Phone # \_\_\_\_\_

Your Email: \_\_\_\_\_@\_\_\_\_\_. \_\_\_\_\_

Parent/Guardian Daytime Contact Phone# \_\_\_\_\_

T-SHIRT SIZE (Circle One) XS S M L XL XXL

**KNOWN DATES YOU WILL BE UNAVAILABLE**  
You will need eight (8) shifts to complete this program.

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

**Circle the # of days you want to work with the DOGS** ➡ 1 or 2

1ST Choice: **S M T W Th F S** 6:30-10:00 or 10:00-2:30

2ND Choice: **S M T W Th F S** 6:30-10:00 or 10:00-2:30

3RD Choice: **S M T W Th F S** 6:30-10:00 or 10:00-2:30



**Circle the # of days you want to work with the CATS** ➡ 1 or 2

1ST Choice: **S M T W Th F S** 6:30-10:00 or 10:00-2:00

2ND Choice: **S M T W Th F S** 6:30-10:00 or 10:00-2:00

3RD Choice: **S M T W Th F S** 6:30-10:00 or 10:00-2:00

