

Willamette Animal Guild (WAG) Spay/Neuter Clinic

3045 Royal Ave • Eugene, OR 97402 541-345-3566 • www.wagwag.org

Willamette Animal Guild (WAG)'s mission is the prevention of cruelty to animals, with a current emphasis on low-cost spay/neuter and wellness services. Our main goal is to improve the lives of animals, stop animal overpopulation and reduce animal suffering by sterilizing over 5,000 animals per year. WAG is financed via program fees and private financial gifts. WAG receives no government funding.

Volunteers are the Lifeblood of WAG!

Being a WAG volunteer can be rewarding, educational, exciting and fun! When animals come to the WAG clinic they are treated as if they are our very own, with a high level of care and compassion. Whether a volunteer walks dogs, works on the surgical recovery mat, sterilizes surgical instruments in the pack room, cleans kennels, answers phones or handles other administrative work, all WAG volunteer roles are critical and highly valued.

WAG's clinic treats animals that are owned, rescued and feral and we are always in need of caring, compassionate and hard-working individuals who love our furry friends. When you join the volunteer team at WAG, you help keep our clinic costs down and ensure that our clinic services are financially accessible to limited income pet owners.

WAG's clinic is a high-quality, high-volume, low-cost spay/neuter/wellness clinic founded in 2008, and we have always relied on volunteers to help us fulfill our mission. Thank you for your interest in becoming a WAG volunteer to help us help animals in our community!

How can I help WAG?

Volunteer positions are Monday-Friday, between the hours of 7:45 am - 4:30 pm. Most volunteers have specific shifts that range from 3-6 hours depending on the position and the volunteer's availability.

There are many ways to get involved with WAG as a volunteer. Please read below to find out more about our exciting volunteer opportunities.

Pack Room Volunteer (best view of our surgical area!)

- Wash surgical instruments
- Sterilize instruments with the autoclave
- Wrap spay and neuter packs
- Wash and sterilize e-tubes and masks

Phone Volunteer

- Translate and transfer voicemails into the WAG call log
- Return client phone calls and answer basic questions
- Assist with scheduling

Assist with Patient Check-in

- Assist with gathering kitties in their carriers
- Walks dogs after they have received their pre-surgical exam
- Weigh dogs
- Settle patients into their kennels for the day

Volunteer on the Post-Surgery Recovery Mat

• Assist our certified veterinary technicians and veterinary assistants with recovering patients after their spay/neuter surgeries (specific requirements are needed for this position, please see below).

Volunteer at Events

- Assist the WAG board of directors before, during, and after our biennial Night of a Thousand Spays gala.
- Volunteer at community tabling events to help get the word out about low-cost spay/neuter and wellness services at WAG.
- Join our community outreach team by posting fliers and posters about WAG services and events.

Requirements for Volunteering with WAG

- Volunteer candidates should be passionate about animals and their welfare, enthusiastic about WAG's spay/neuter mission, hardworking and reliable.
- Those interested in volunteering in our pack room and/or for dog walking must be at least 16 years of age and have the ability to stand for 2-4 hours with frequent walking.
- WAG requires that surgical recovery mat volunteers be at least 18 years of age, have personal health insurance and be experienced with post-surgical recovery as it requires direct contact with animals post-surgery. These volunteers should also be able to lift up to 35 lbs, and comfortably squat and sit on the recovery mat (futon-style mattress) 3-4 hours at a time.
- All WAG volunteers must commit to a minimum of 3 hours per shift. Most volunteers have shifts that are between 4-5 hours.
- WAG does not participate in court-appointed community service programs.
- WAG's clinic is an excellent place to fulfill student internship requirements!
- All WAG volunteers should be able to understand and strictly adhere to verbal and written instructions, possess a high attention to detail, and be able to quickly and clearly communicate concerns or questions to WAG staff.

Name				Date
				e
Home Phone_		Cell N	lumber	
Email Address:				
Preferred Conta	act Method: Phone	Text	Email	
Employer:		O	ccupation:	
Are you 16 or o	older? Yes N	Io A	are you 18 or older? Y	es No
Have you done	volunteer work be	fore? Yes No		
If yes, where an	nd what did you do	?		
What volunteer	position would yo	u like to do at WAG	?	
Please list any	hobbies or interests	:		
What skills, tra	ining, or knowledg	e do you wish to util	ize at WAG?	
Why do you wa				
Do you have an	ny physical limitation	ons? Please list:		
Emergency Co	ntact		Phone Number	
Emergency Co	ntact		Phone Number	
Are you intere	ested in? (check all	that apply):		
Surgio	cal Recovery Mat V	Volunteer Volunteer		
Pack	Room Volunteer			
Morn	ing Dog Walker			
Morn	ing Check-in Volur	nteer		
Phone	e/Administrative Vo	olunteer		
Funds	raising/Outreach/Co	ommunity Events Vo	lunteer	
between 7:45 a	m & 4:00 pm, M-F	. If interested in fund	•	r times are limited munity events, please available on weekends.
Monday:	Tuesday:	Wednesday:	Thursday:	Friday:

VOLUNTEER STATEMENT OF UNDERSTANDING, WAIVER AND HOLD HARMLESS AGREEMENT

- 1.I understand that there is an inherent risk associated with handling animals while volunteering for Willamette Animal Guild (WAG)'s spay/neuter and wellness clinic. I release, discharge, indemnify and hold harmless WAG, its employees, volunteers, board members and agents from any and all claims, causes of action or demands of any nature or cause connected with my volunteer services, including, but not limited to, any financial cost or obligation, attorney's fees and court costs that may be incurred. Such risks may include but are not limited to: animal bites, accidents, injuries and personal property damage.
- 2. I understand that bites or other wounds from animal handling can be very serious in nature. They may cause injury or infection which may require professional medical attention, medication and hospitalization. I agree to follow all WAG protocol and procedures with respect to reporting and immediate treatment of animal bites or wounds I may sustain while volunteering at the WAG clinic, including seeking immediate professional medical assistance. WAG recommends that any wound inflicted by an animal during your volunteer time at our clinic be immediately evaluated by a medical professional. I understand that treatment or costs associated with any illness or personal injury sustained while in my capacity as a WAG volunteer, regardless of the nature or reason, shall be covered by me or my personal insurance.
- 3.I understand that public relations/outreach is important for WAG and its mission. I, therefore, agree to allow WAG and its employees, volunteers and/or agents to use any photographs, video or film taken of me while volunteering for WAG. I understand that I will not be notified when WAG intends to use my image whether in photographic, video or film medium when used for public relation/outreach purposes. I understand that I may "opt-out" of having my image used in WAG promotion by providing written notice to WAG's volunteer coordinator prior to my first volunteer shift. I further understand that if I volunteer at a public event, WAG may have no control over my image being used in a promotional manner by the organization or any other entity.
- 4. I will be asked to sign a confidentiality agreement if my volunteer application is approved. I understand that confidentiality of information regarding clients, patients, staff, volunteers and procedure/protocol is mandatory at WAG and I understand that I will be required to maintain confidentiality as directed in the confidentiality agreement.
- 5. I understand that either WAG or I may terminate the WAG/volunteer relationship at any time for any reason. I also understand that WAG relies on its volunteers to arrive punctually for their shifts and to give adequate notice to the WAG volunteer coordinator when unable to meet a scheduled commitment or when needing to terminate the WAG/volunteer relationship.

I (Print Name)	
Volunteer Signature (Parent/Guardian Signature if under 18)	Date