



VOLUNTEER APPLICATION

PLEASE PRINT

Today's Date: _____

Name: _____ Date of Birth: _____

Address: _____

City/State _____ Zip _____

Phone Number: _____ Cell Home Work

Please Circle One

Alternate Phone Number: _____ Cell Home Work

Please Circle One

Email: _____

Print Very Clearly

Employer: _____ Position: _____

Emergency Contact Name: _____

Relationship: _____ Emergency Phone: _____

T-Shirt Size (circle one): SM M L XL XXL

Have you ever been convicted of, pled guilty, nolo contendere or no contest to a crime? ___Yes ___ No

If yes, please explain on reverse side (a conviction will not necessarily prevent you from volunteering).

FOR STUDENT PROGRAM or COMMUNITY SERVICE WORKER

Number of Service Hours Required: _____ Deadline to Complete: _____

School and Class: _____

*** OFFICE USE ONLY ***

Received: _____

Notes:

VOLUNTEER AVAILABILITY – Shelter Hours: 8AM to 5PM

AM: Morning Shift = 9a - 1pm or **PM:** Afternoon Shift = 1pm - 5pm

Circle All That Apply

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Times Available	Times Available	Times Available	Times Available	Times Available	Times Available	Times Available
AM or PM	AM or PM	AM or PM	AM or PM	AM or PM	AM or PM	AM or PM

How many days and/or shifts each week can you volunteer? _____

Which do you prefer? (Circle One): DOGS CATS CATS & DOGS

VOLUNTEER POSITIONS (Circle All Interests):

Kennel Assistant	Fundraising Events	Dog Walking (Requires Kennel Assistant Hours and Safety Orientation)
Cattery Assistant	Foster Care Program	Mobile Adoptions (On Weekends)
Office Assistant	General Maintenance	Animal Transport (Vehicle Required)
Customer Service	Landscaping	

Note: Every day we have Kennel and Cattery Assistant positions available. Please indicate volunteer positions of interest in order of preference:

1st _____ 2nd _____ 3rd _____

Any other special skills/resources you could offer? _____

Describe any prior animal-related work experience or education: _____

List previous volunteer experience:

Agency	Activity	Dates

Volunteer roles in a number of areas require varying degrees of physical strength, agility and/or coordination. Do you have any concerns about your physical abilities? If yes, please explain:

SAFE ANIMAL SHELTER
Liability Waiver

I, _____, hereby fully and forever release and discharge the Safe Animal Shelter, its agents, employees, directors, officers and all liability insurance carriers from all actions, damages or judgments which I may have, now or in the future, against Safe Animal Shelter for all personal injuries to myself, known or unknown and/or arising out of the activities of myself as a volunteer.

I hereby grant permission for film, video and photography to be taken during my participation in the Safe Animal Shelter Volunteer Program. I understand that this media will be produced and used for marketing purposes. I authorize Safe Animal Shelter to use my photograph on its website, in social media or in other marketing materials without further consideration, and I acknowledge the shelter's right to crop or treat the media at its discretion. I also acknowledge that the shelter may choose not to use my photo at this time, but may do so at its own discretion at a later date.

The policies, procedures and objectives of the Safe Animal Shelter have been explained to me and I agree to follow and abide by their guidelines. I have read this release, understand all of its terms and I execute it voluntarily and with full knowledge of its significance.

Signature of Volunteer

Date

Print Volunteer Name

MINOR CONSENT: (Required for 16 - 21yrs of age)

I, _____ give my consent for _____,
Parent/Legal Guardian Name of Minor

to volunteer at Safe Animal Shelter according to the guidelines listed above.

Signature of Parent/Legal Guardian

Date

Printed Signature of Parent/Legal Guardian

Parent Phone #