

True Friends Animal Welfare Center

Volunteer Application

Name _____

Address _____

Home Phone _____ Cell Phone _____

E-mail address _____

Are you at least 18 years old? Yes _____ No _____

Emergency contact – Name _____ Phone Number _____

Name _____ Phone Number _____

Please indicate the days you would like to volunteer

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

What types of volunteer work are you interested in assisting True Friends Animal Welfare Center (check as many as you wish).

Dog walking & socialization	Assisting with fundraising & public events
Dog care, feeding, grooming	Transporting animals
Kennel care & cleaning	Fostering a dog or cat at my home
Cat Cuddling, playing, grooming	Other:

Do you have any personal health concerns that might impact your work as a volunteer at True Friends Animal Welfare Center? _____

Describe any previous experience working with animals.

Volunteer Agreement

1. I will abide by the mission, rules, regulations, policies, and programs of True Friends Animal Welfare Center while I am a volunteer.
2. I will treat all animals with respect and will work as a team member with other volunteers.
3. I assume the risks of being bitten, scratched, injured, or frightened by cats, kittens, dogs or puppies in connection with my volunteer work for the shelter. True Friends Animal Welfare Center is not liable to me for any injuries, damages, liabilities, losses, judgments, costs, or expenses whatsoever, which I might suffer or sustain in connection with the performance of my volunteer activities for the shelter, unless they are the result of the shelter's gross negligence or intentional misconduct. I will indemnify, defend, and hold the shelter, including the board of directors and officers, harmless from and against any claims, lawsuits, injuries, damages, losses, costs or expenses whatsoever, sustained by any companion animal or any person in connection with my intentional misconduct or grossly negligent performance of volunteer activities for the shelter, or my breach of shelter's rules, regulations, policies and programs.
4. I am current on my tetanus vaccination and am covered by a health insurance plan. I do not have any serious medical conditions that prohibit me from participation in the typical activities of an animal shelter volunteer.
5. I understand that I am not bring any unauthorized friends, relatives, children or pets to the shelter at any time without permission.
6. I understand that I am not entitled to any benefits for my personal companion animals, including free or reduced – price spay/neuter, medical care, animal food, pet supplies from the shelter for my own personal use, unless given permission.
7. I authorize the shelter to use photographs of me for public relations purposes.
8. I understand and agree that the shelter may refuse volunteer applications for any reason.

Signature of Volunteer

Date

Signature of parent/guardian if under 18 years old

Date



16332 SR 706 Montrose, PA 18801

"Giving Animals a Safe Refuge & Hope for a Second Chance"