

Volunteer Application & Release

PawPular Friends is a privately funded, non-profit animal rescue organization. The information provided to PawPular Friends by completing this form will enable us to direct you towards an appropriate, rewarding experience.

Please complete all form and return to Pawpular Friends.

<u>Personal</u>	Informatio	<u>on</u>						
Name								
Address-								
Cell Phon	e			_Home P	hone			
Email								
Name of	Parent/Gu	ardian if under	18					
Emergen	cy Contact							
Name				Relationship				
Primary F	hone		Secondary Phone					
<u>Voluntee</u>	r Profile							
Please de	escribe any	present of pas	t volunteer	work:				
Organizat	tion							
		l experience d						
Availabili	ity							
Are you v	olunteerin	g to fulfill cour	t ordered c	ommunit	y service red	quirements?	Yes	No
If yes, ho	w many ho	urs?						
Circle the	e days you a	are able to volu	unteer					
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday		



What hours are you available to voluntee	er?				
WeekdaysW	Veekends				
Do you have any allergies or physical cor	nditions that might affect your volunteer work?Yes	No			
If so, please describe-					
Please check any areas in which you wo	uld like to participate				
Special Fundraising events					
Adoptions (special off site adoption	events)				
Animal Care (am/pm animal care/cleaning, general housekeeping)					
Grooming animals (bathing, brushing	g, etc.)				
General socialization					
Transporting animal to and from even	ents or vet visits				
Do you have any special skills, training, in	nterests, or hobbies you would like to share with us?				



Volunteer Agreement

l, a	agree to the following terms and
conditions intending to be legally bonding to them.	
I will abide by the mission, rules, regulations, policies and programs ovolunteer.	of PawPular Friends while I am a
I will not engage in any unsafe, illegal, or unethical activities while ac volunteer.	cting as a PawPular Friends
As a condition of volunteering, which I acknowledge to be adequate into an additional confidentiality agreement as well as a waiver of liagreement.	
The above conditions have been reviewed with me and I understar sufficient grounds for PawPular Friends to request and implement	- ·
Volunteers Full Legal Name	
Legal Signiture	
Date	
Parent/Guardian Signature (if under 18)-	
	

Confidentiality Agreement

Information concerning the management and operation of our organization is generally not known to the public and should be kept confidential. The following guidelines have been developed for this purpose.

Guidelines for protecting confidentiality:

- Confidential information should only be shared with those inside the organization whose jobs require them to have access to the information or when the law requires or protects the release of such information.
- Board Members, Employees, or Volunteers should not disclose sensitive or non-public information to people outside the organization or discuss it in public places.



- Documents containing sensitive information-including information stored on computer systems- should be handled carefully and must be properly stored.
- I have read and understand the above and agree to comply with PawPular Friends's Confidentiality Agreement.

Signature-_____

Date	
<u>Liability Release Waiver</u>	
 I recognize that while preforming my services in a voluntary capacity in handling animals thermay be a risk of injury. 	re
 On behalf of myself, my heirs, and personal representatives I hereby release and hold harmle PawPular Friends, its Board of Directors, agents, and employees from any and all claims, caus of action or demands of any nature or cause connected to my volunteer service. 	
 I also agree to release and hold PawPular Friends harmless for any and all damages to my personal property while preforming my volunteer services. 	
 If I am signing this release form as a parent or legal guardian of a minor volunteer (under 18 years of age), I hereby give my consent to allow my child to volunteer services for PawPular Friends. 	
I agree to hold PawPular Friends harmless for any claim, loss, or injury incurred by such child.	•
I acknowledge that I have read and fully understand the terms and conditions of the foregoing liabilit release waiver.	У
Signature-	
Date	
Parent/Guardian Signature (if under 18)-	