

**DOGTREE PINES SENIOR DOG SANCTUARY
VOLUNTEER APPLICATION**



Name: _____

Date Of Birth: _____

Address: _____

City/State/Zip: _____

Is your physical address the same as your mailing address? Yes/No

Phone: _____

Email: _____

Best Way To Contact - Circle One: Phone/Email/Text Msg

Drivers License No. _____ State Issued _____

Please tell us about yourself, why do you want to volunteer for DTP?

Do you have any dog related training or care experience? No/Yes

If Yes, Explain _____

Do you have pets of your own? No/Yes

Do you have senior dog experience? No/Yes

Have you ever volunteered at a shelter or with a rescue group? No/Yes

Duties: _____

Please list name, phone, & relationship of three references (only one relative)

Have you ever surrendered a pet to a shelter or rescue group? Yes/No

If yes, why?

Are you interested in Fostering? No/Yes

Duration-Circle One or both: Short term/Long term

Comments

EMAIL FORM TO: DOGTREEPINES@GMAIL.COM

DOGTREE PINES SENIOR DOG SANCTUARY VOLUNTEER APPLICATION



Name: _____

Please circle any activities that interest you:

Dogs:

Dog Walking Dog Brushing Trim Nails Play/Bonding

Transportation of Pets

Food Prep:

Grind Chicken (Weekly) Veggie Glop (monthly)

Property:

Poop Duty Clean up baby guts
(Dog toy stuffing) De-Urinate Rugs Rake

Weed Eat Blow off Decks Forest Maintenance

House:

Laundry Sweep Vacuum Dust Windows

Marketing etc.:

Events Fundraising Website Social Media (Facebook/Instagram/Youtube)

Thank You notes to donors Gathering gifts for Auctions

Gift Cards from Local Businesses

Crafting

**DOGTREE PINES SENIOR DOG SANCTUARY
ACCIDENT WAIVER AND RELEASE OF LIABILITY**

In consideration of my participation with DogTree Pines Senior Dog Sanctuary (DTP), an Arizona nonprofit organization, I agree that I:

1. Will abide by the policies, procedures and programs of DTP. While representing DTP, I will work in accordance with DTP's mission, take reasonable care when making decisions, and conduct myself in such a manner as to enhance the organization's public standing.
Initial Here _____
2. Understand and agree that certain risks may be associated with DTP volunteer activities, especially when handling animals, and that all activities undertaken for DTP are to be performed voluntarily by me and assumed at my own risk.
Initial Here _____
3. Waive, release and forever discharge DTP and its officers, directors, agents, and volunteers from all rights, causes of action, claims and/or demands that I now have or may hereafter have involving, without limitation, illness, personal injury, disability, death, or property damage I suffer or sustain as a direct or an indirect result of or in connection with my volunteering for DTP, unless they are the result of DTP's gross negligence or intentional misconduct.
Initial Here _____
4. Will indemnify, defend, and hold harmless DTP and its officers, directors, agents, and volunteers from and against any and all liability, claims, demands, damages, lawsuits, injuries, losses, judgments, costs or other expenses whatsoever, sustained by any animal or person as a direct or an indirect result of or in connection with my performance of volunteer activities for DTP, or my breach of DTP's rules, policies, guidelines or programs, or as a result of my failure to perform the volunteer services.
Initial Here _____
5. Will treat the public, owners, and other volunteers in a courteous manner, including:
 - a. Speaking to and about others as I would want them to speak to or about me;
 - b. Assuming the best about others' intentions until I have all the facts;
 - c. Listening to understand the point of view of others, whether or not I agree with them;
 - d. Speaking in a way that does not demean others, even if I disagree; and
 - e. Speaking kindly to others and avoiding aggressive nonverbal behavior, sarcasm or derogatory statements when I do not agree with someone.
6. Will promptly return any DTP property, records, and funds to the organization if I stop being a volunteer for DTP for any reason or upon DTP's request.
7. Understand that the DTP Board reserves the right to refuse an application of or dismiss any volunteer who does not abide by the terms of this agreement or who in any way degrades the image of DTP.
8. Have accurately and truthfully completed this Volunteer Application and Accident Waiver and Release of Liability, and that if I am a minor under age 18 my parent or legal guardian approves of my intent to volunteer with DTP.
9. I grant permission for DTP to take photos or videos to use for public purposes which may include my image.

It is understood and agreed that all terms of this Volunteer Application and Accident Waiver and Release of Liability are intended to be legally binding on me, as well as my heirs, executors, administrators, legal representatives, and assigns.

Individual Applicant (<i>Parent must sign for minor under age 18</i>)		Dogtree Pines Representative	
Signature _____	Date _____	Signature _____	Date _____
Print Name _____		Print Name _____	
Email and / or Phone # _____			