

Rec'd \_\_\_\_\_ Contact \_\_\_\_\_

Shift(s) \_\_\_\_\_ Trained \_\_\_\_\_

Hndbk \_\_\_\_\_ SL \_\_\_\_\_

told \_\_\_\_\_

Sched \_\_\_\_\_ Roster \_\_\_\_\_ Emailed \_\_\_\_\_

**PET WELFARE VOLUNTEER APPLICATION**

(Must be 16 or older to volunteer)

Please type or print neatly in ink

Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

Email Address \_\_\_\_\_

Do you have base access? Yes  No 

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone Number \_\_\_\_\_ Relationship \_\_\_\_\_

How did you hear about Pet Welfare? \_\_\_\_\_

**Check the shift(s) you are available:**

Cat &amp; Dog approximate shift times 7:00-9:00 AM or 4:30-6:30 PM, Office Shifts are 9AM-1PM M-Sat

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	Substitute
<input type="checkbox"/> AM	<input type="checkbox"/> AM	<input type="checkbox"/> AM	<input type="checkbox"/> AM	<input type="checkbox"/> AM	<input type="checkbox"/> AM	<input type="checkbox"/> AM	<input type="checkbox"/> No regular shift, but want to volunteer
<input type="checkbox"/> PM	<input type="checkbox"/> PM	<input type="checkbox"/> PM	<input type="checkbox"/> PM	<input type="checkbox"/> PM	<input type="checkbox"/> PM	<input type="checkbox"/> PM	

Are you interested in  Cats  Dogs  Office (check one or more)

If office, Which Day(s) \_\_\_\_\_

Would you also be interested in  Fundraising  Facilities Maintenance  Grant Writing?**Disclaimer:** While we appreciate all of our volunteers, in order for volunteering at Pet Welfare to be utilized for outside recognition, the following information must be provided: Active Duty: To be used for awards consideration/nomination, etc. Provide supervisor's name and contact information.

Name \_\_\_\_\_ Contact Email \_\_\_\_\_ Contact Phone \_\_\_\_\_

 School Credit/Community Service: Please provide parent or supervisor/instructor contact information for verification and accountability: Name \_\_\_\_\_ Email \_\_\_\_\_ Phone \_\_\_\_\_

All volunteers are expected to communicate with shift leaders or volunteer coordinators in the event of an expected absence. Failure to show for shifts adversely affects the animals and the other volunteers. **Repeated no-shows will lose volunteers privilege of volunteering at Pet Welfare and those utilizing volunteering for credit will have supervisors informed.**

In signing this statement, I agree to abide by the policies and procedures of Pet Welfare during my time as a Volunteer:

Your Name \_\_\_\_\_

Date \_\_\_\_\_

Parent/Guardian's Signature (If Applicant is Under age of 18) \_\_\_\_\_

Date \_\_\_\_\_

**INFORMED CONSENT**  
**HAZARDS AT PET WELFARE**

**CAUTIONS**

1. Pet Welfare is constantly making minor renovations and improvements to its facilities. I understand that tripping hazards may be present, and that it is my responsibility to recognize and avoid them.
2. Some of the tasks required of volunteers may involve lifting or moving large heavy objects, such as bags of dog food, kitty litter, or animals. I understand that I must not attempt to move large heavy objects beyond my physical abilities, and either obtain assistance or not move them until assistance is available.
3. I am aware that some of the animals I may come in contact with may bite or scratch. This is not because the animals are necessarily vicious. Animals in strange surroundings or with strange people are most likely to defend themselves against a perceived threat.
4. I am aware of the risks associated with volunteering in the cat room, including ammonia exposure due to cat urine and the possible transmission of toxoplasmosis. I will utilize the necessary precautions to ensure my safety (to include utilizing gloves and masks as needed, etc.) **(Cat Volunteers Initial \_\_\_\_\_)**
5. I have freely chosen to work at Pet Welfare, a no-kill shelter on Eglin AFB. I am aware of the risks to myself, my family, my personal pet, and my health that my actions may entail. I hereby release Pet Welfare from any responsibility if I become injured or I, my family, or my personal pets become sick as a result of my volunteer activities.

**PERSONAL SAFETY**

Some diseases can transmit from dogs/cats to humans. Though mostly mild irritation, if you work with dogs/cats, you should know about them and their preventive measures. Minor diseases include ringworm and/or those caused by fleas and ticks. More serious are rabies. **Pregnant or possibly pregnant women should consult with their physician before volunteering at Pet Welfare to discuss associated risks.** The most effective way to prevent the spread of disease is by wearing gloves and good hand washing using anti-bacterial soap after handling any animal. Animals which have not yet been vetted must be handled with caution.

I understand that it is my responsibility to practice good hygiene and maintain current recommended vaccinations to avoid increasing my risk of catching or spreading an animal borne disease. I understand the above risks and will not hold Pet Welfare responsible for any illness or injury incurred while volunteering for your organization. I also understand that I will not bring along to my shift any person that does not have a completed and approved volunteer application on file at Pet Welfare. Furthermore, I will aid in the identification and prevention of illnesses affecting the animals of Pet Welfare.

In signing this statement, I have read, understand, and agree to abide by the policies and procedures of Pet Welfare during my time as a member of the volunteer team, and to serve at the pleasure of Pet Welfare, conforming to all rules and regulations commonly applied to employees of Pet Welfare. I will address all comments, questions, suggestions, complaints, and criticism to a board member.

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Printed Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

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Pet Welfare Witness \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

***\*THIS PAGE MUST BE SIGNED by volunteer applicant PRIOR to submission AND witnessed by an office volunteer\****