

Animal Haven Rescue of Bay County, FL

Volunteer Application

Name: _____

Date of Birth: _____

Address: _____

Phone: _____

E-Mail: _____

Check all areas for which you are interested in volunteering:

- Coordinating Volunteers
- Event Planning Committee
- Foster Care of Homeless Pets
- Adoption Liaison
- Website / Social Media Coordinating / Monitoring
- Transporting Pets

1. Have you previously fostered cats and/or dogs? ___ Yes ___ No

2. Are you interested in fostering cats, dogs or both? ___ Cats ___ Dogs ___ Both

3. Are you interested in fostering bottle babies, kittens, and/or adult cats?

___ Bottle babies ___ Kittens ___ Adult cats

4. Do you have experience with bottle babies, kittens, and/or adult cats?

___ Bottle babies ___ Kittens ___ Adult cats

5. Are you available and willing to take them to vet appointments and/or adoption events?

___ Yes ___ No

6. If you live in an apartment, does your complex allow pets?

___ Yes ___ No

7. Is everyone in the household in agreement to foster the pet(s)?

___ Yes ___ No

8. Does anyone in the household have any known allergies to pets?

___ Yes ___ No

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9. Please provide the names and birthdates of other household members that will be assisting in caring for the foster animal(s):

VOLUNTEER RELEASE: I hereby fully and forever release and discharge Animal Haven Rescue of Bay County, FL (AHRBC), its agents, directors, officers and liability insurance carriers from all actions, damages, or judgments which I have now or in the future may have against AHRBC, for all personal injuries to myself, known or unknown, arising out of my activities as an adult volunteer of AHRBC.

I, the undersigned, have read this Release and fully understand all of its terms and conditions, and I sign it voluntarily and with full knowledge of its significance.

Signature _____ Date _____

PARENTAL CONSENT AND WAIVER: I consent and agree to allow my minor child _____ [print his/her full name] to volunteer with Animal Haven Rescue of Bay County, FL (AHRBC). In consideration for allowing my child to volunteer with AHRBC, I agree to assume any and all risks connected with my minor child's participation in AHRBC activities. I waive and release AHRBC from any and all claims for damages or injury to my minor child as a result of his/her participation as a volunteer with AHRBC, including any and all claims of negligence of others, and agree to hold AHRBC and all persons or organizations associated with AHRBC harmless for any claims made against them as a result of the actions of any minor child of mine who participates as an AHRBC volunteer. I represent that I am the parent and/or legal guardian of this minor child and that I am not under any legal disability that would inhibit my ability to understand and grant this waiver and release.

Printed name: _____

Signature _____ Date _____

Volunteers must be able to react quickly and rationally, as animals can sometimes be very unpredictable. Volunteers who work with animals must have the ability to restrain the animals for their own safety, the safety of others and the safety of the animals. AHRBC reserves the right to place volunteers in areas best suited to their abilities and restrictions, and to reject volunteers whose participation at events or programs sponsored by AHRBC could potentially place the participant, the animals or other individuals at risk of harm.