



SAFE PAWS VOLUNTEER APPLICATION

Our organization encourages the participation of volunteers who support our mission. We rely on volunteers to accomplish our mission to help unwanted and abandoned animals to find their forever homes. We are sure you will find that volunteering is rewarding and fulfilling experience. You must be 18 or older to complete & submit the application. The information on this application will be kept confidential and will help us find the most satisfying and appropriate volunteer opportunity for you.

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Do work outside the home _____ If so how many hours? _____

Availability:

Sunday _____ Monday _____ Tuesday _____ Wednesday _____

Thursday _____ Friday _____ Saturday _____

Times Available: _____

Any special talents or skills you have that you feel would benefit our organization

What activities interest you most?

_____ Administration

_____ Fundraising

_____ Dog Walking

_____ Fostering

_____ Events

_____ Home visits

_____ Dog Taxiing: From foster home to vet
appts

How far? _____

If interested in fostering a dog, are you comfortable with all breeds?

___ Yes ___ No Please specify _____

Household Information: Humans - Names, Ages, & Occupation

Current Pets: Names, Breed, Gender, Friendly, Altered?

If you do not have a dog now, have you ever owned a dog(s) for which you were the primary caretaker?

____ Yes ____ No If yes, what happen to the dog(s)?

If you have given away, sold or surrendered any animal to a shelter, rescue, pound or humane society, please explain the circumstances:

Additional Comments

REFERENCES

Personal Reference Name _____

Personal Reference Phone _____ Relationship _____

Professional Reference Name _____

Professional Reference Phone _____ Relationship _____

I attest that I understand the risks present in volunteer duties, particularly in working with animals and freely assume those risks and agree to release and indemnify Safe Paws Rescue, it's officers, agents, employees and volunteers from all claims for injury, accident, loss or damage to the undersigned because of such volunteer duties. WE ARE A NON-PROFIT ORGANIZATION.

Applicants signature _____

Today's Date (required) _____

Please return to safepaws.florida@gmail.com