

Volunteer Candidate Information PAWSibilities Animal Rescue

Harleysville and Skippack, Pennsylvania

Contact Information

Name _____ Date of Birth _____

Street Address _____

City _____ ST _____ Zip Code _____

Home Phone _____ Work _____ Cell Phone _____

Email Address _____

Availability

During which hours are you available for volunteer assignments?

check all that apply...

Monday ___ 9-12 ___ 12-3 ___ 3-6 ___

Tue ___ 9-12 ___ 12-3 ___ 3-6 ___

Wed ___ 9-12 ___ 12-3 ___ 3-6 ___

Thurs ___ 9-12 ___ 12-3 ___ 3-6 ___

Friday ___ 9-12 ___ 12-3 ___ 3-6 ___

Sat ___ 9-12 ___ 12-3 ___ 3-6 ___

Sunday ___ 9-12 ___ 12-

3 ___ 3-6 ___

Tell us in which areas you are interested in volunteering

Cat Care/Feedings ___ Deliveries/Transport of cats ___ Fostering cats ___

Barn Cleaning/feeding ___ Volunteer Coordination/calling ___ Newsletter Articles ___

Customer Service ___ Fundraising ___ Local Pet Events ___

Cat Care on location at local Pet Valu ___ Souderton ___ Green Lane ___

Organizing with store product and set up ___ Social Media ___ Adoptions ___

PAWS Boutique in Skippack ___ PAWS Thrift Store Harleysville ___

Barn Location Towamencin ___ Med Room ___ Felv Room ___ Special Needs Room ___

Administer Medications ___ (requires special training or previous experience) _____

Additional Information

Can you drive?

Do you have a car?

Driver's License State:

Number:

Any **special conditions**/limitations/medications to be aware of? (e.g. Asthma, bee allergies, Heart Conditions, etc.)

Do you have any **physical or psychological** issues/illnesses PAWS should be made aware of? (if yes, please explain)

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work/experience, or through other activities, including hobbies or sports.

Previous Volunteer Experience

Summarize your previous volunteer experience (experience is not required to volunteer)

Person to Notify in Case of Emergency

Name_____

Street Address_____City_____ST _____zip Code_____

Home Phone _____Work Phone_____Cell
Phone_____

Vaccines

Please provide info on your last Tetanus vaccination Tetanus_____date
Rabies/Other

Date of Vaccination, pls call your doctor if you are uncertain

Do you have health insurance_____name of provider_____

Personal References

Reference 1 Name _____
 Street Address _____ City _____ ST _____ zip Code _____
 Home Phone _____ Work Phone _____ Cell Phone _____

Reference 2 Name _____
 Street Address _____ City _____ ST _____ Zip Code _____
 Home Phone _____ Work Phone _____ Cell Phone _____

Background Check

PAWSibilities Animal Rescue reserves the right to conduct state and federal background checks.

Have you ever been arrested for animal abuse or neglect?

Yes No

If yes, please list the date(s) of the arrest(s) and any facts and circumstances surrounding the arrest(s). Being arrested does not automatically exclude you from consideration. If you meet the requirements, you will be able to explain the circumstances of your arrest. If you are subsequently arrested for animal abuse or neglect during the course of your volunteer services at PAWSibilities, you agree to notify Volunteer Services. Failure to do so may result in termination.

Have you ever been arrested, convicted, plead no contest, or plead guilty to a felony or misdemeanor?

Yes No- be specific

PAWSibilities PARTICIPANT AGREEMENT, RELEASE, AND ACKNOWLEDGEMENT OF RISK

In consideration of the services of PAWSibilities Animal Rescue, their agents, owners, officers, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as "PAWS"). I hereby agree to release and discharge PAWS, and/or any associated third parties, on behalf of myself, my children, my parents, my heirs, assigns, personal representative and estate as follows:

1. I acknowledge that any cat, small or exotic animal, farm animal or dog related activity entails known and unanticipated risks which could result in physical or emotional injury, paralysis, death, or damage to me, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.

The risks include, among other things: The propensity of an animal to behave in ways that may result in injury, harm, or death to persons on or around them irrespective of their previous behavior and characteristics; the unpredictably of an animal's reaction to such things as sounds, sudden movement,

and unfamiliar objects, persons, or other animals, or more: certain hazards such as surface and subsurface conditions; collisions with other animals or objects; failing to maintain control over the animal; being bounced, jostled, or thrown due to passage over varied, sometimes rough terrain; the risk of falling off or being thrown from a horse could occur resulting in injuries even death; adverse weather could result in my being exposed to cold, wind, rain, and/or snow, and could cause a loss of control over the animal; latent or apparent defects or conditions in equipment, animals or property: contact with plants or animals; my own physical condition or my own acts or omissions; first- aid, emergency treatment or other services rendered; consumption of food or drink.

Furthermore, PAWS has difficult jobs to perform. They seek safety, but they are not infallible. They might be ignorant or uninformed of a participant's fitness or abilities. They might misjudge the weather, the elements, or the terrain. They may give inadequate warnings or instructions, and the equipment being used might malfunction.

2. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.

3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless PAWS from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of PAWS' equipment or facilities, including any such Claims which allege negligent acts or omissions of PAWS.

4. Should PAWS or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless to such fees and costs.

5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I have no medical or physical conditions, which could interfere with my safety in this activity, or else I am willing to assume and bear the costs of all risks that may be created, directly or indirectly, by any such condition.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against PAWS on the basis of any claim from which I have released them herein. I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Signature of Participant and/or

Parent/Guardian

Date: _____

Just enter your name to sign the form. If you are under 18, we will need a parental consent form signed too!

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.

Samantha Carroll, Executive Director and Kathy Mina PAWS Volunteer Manager

www.PAWSiilitiesRescue.org

PAWSiilitiesAnimalRescue@yahoo.com