

For office use only

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Volunteer Application

Section 1: Important Information & Policies – Please read!

Step 1: Complete this application! Fax to 302-427-2855, mail to 12 Germay Drive, Wilmington, DE 19804 or bring it with you to your orientation.

Step 2: Register for a volunteer orientation session (held on Wednesdays at 6pm) by contacting Shannon O’Neill, Director of Volunteer Services at 302-427-8514 x5 or volunteer@faithfulfriends.us

Step 3: Pay your annual volunteer membership fee and receive your Faithful Friends T-shirt. (\$25.00 for adults/students, \$10.00 for seniors 60+, and \$10.00 for additional family members.)

Step 4: If you want to volunteer in our cat department you will be scheduled for a *Cat Care Training Class*. If you want to volunteer in our dog department, you will be scheduled for a *Dog Handling Class*. You can register for the appropriate training class(es) at the general orientation session.

- **Volunteers under the age of 16 years must be accompanied by a parent/guardian at all times.**
- **Volunteers who are 16 & 17 years of age may volunteer alone, but must have a parental consent on file, and must have a parent/guardian present at orientation & at the Dog Handling Class.**
- **Volunteers must be 16 years old or older to volunteer in the Dog Department – no exceptions.**

Section 2: Contact Information (please print clearly)

Name: _____ Date: _____

Address: _____ Email Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Alternative Number/Cell: _____

Date of Birth: ____/____/____ Age: _____

Convicted of a crime? on probation? or arbitration? Yes _____ No _____

Employer/School: _____ Occupation: _____

Does your Organization Participate in Charitable Gift Matching Programs? Yes _____ No _____ Not Sure _____

Are you pregnant, afraid of, or allergic to animals? Have an immune system deficiency, or any medical needs? Do you have any physical or emotional conditions that might hinder your volunteer service or require us to provide you with extra assistance or supervision?

Yes _____ No _____ If yes, please explain: _____

Why do you want to volunteer for Faithful Friends? _____

How did you hear about us? _____

Section 3: Your Interests

Cat Care (Shelter)	Fundraising	Laundry/Dishes
Cat Care (Pet Stores)	Graphic Design / Marketing	Maintenance
Cat Cuddler	Greeter / Adoption Counselor	Office work / Mailing
Dog Care / Dog Exercise	Healthy Pet Clinics	Spay/Neuter Clinics
Foster Care (Cats/Kittens)	Pet Therapy Program	Pet "Life" Line
Foster Care (Dogs/Puppies)	General Cleaning	Adoption Days

Section 4: Volunteer Release

I, _____, hereby agree to accept a position as a volunteer worker for Faithful Friends Inc. (herein after referred to as FF), and in doing so, I agree to comply with all the rules and regulations established by FF, and I understand that failure to do so may result in my immediate termination as a volunteer. As a volunteer, I agree to do my best to represent FF to the public in an accurate and professional manner.

I acknowledge that my services are provided strictly on a volunteer basis, without pay or compensation of any kind, and without liability of any nature of behalf of FF, all services to be performed at my own risk.

I recognize that in handling animals and performing other tasks, therein exists a risk of injury including physical harm caused by the animals. On behalf of myself, my heirs, personal representatives and executors, I hereby release , discharge, indemnify and hold harmless FF, its staff, volunteers, members and Board of Directors from any and all claims, causes of action or demands of any nature of cause, including costs and attorneys fees incurred by FF in connection with the same, based on damages or injuries which may be incurred or sustained by me in any way connected with my services to FF, including but not limited to animal bites, scratches, accidents or injuries. I also understand that as a volunteer, I am not covered by any worker’s compensation policies.

I understand that public relations are an important part of volunteering at FF. On behalf of myself, my heirs, personal representatives, and executors, I hereby allow FF to use any photographs taken of me for use in public relations efforts.

 Volunteer Signature Date

To be filled in by parent/guardian if volunteer is under the age of 18:

My son/daughter, _____, has my permission to participate in the Faithful Friends Volunteer Program. I understand that my son/daughter will be expected to abide by the rules and regulations, guidelines and responsibilities of the agency.

 Parent/Guardian Signature Date

Section 5: Emergency Contact

Name: _____ Relationship: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Thank you for your interest in volunteering for Faithful Friends!