

RU4ME PET RESCUE

VOLUNTEER APPLICATION



RU4ME PET RESCUE, 5307 Piping Rock Dr Boynton Beach, FL 33437

Date: _____

Name: _____ Under 18 (Age) _____ D.O.B. _____
Minimum Vol age is 16. If under 18, parent must co-sign to give permission.

MINIMUM COMMITMENT FOR COMMUNITY SERVICE HOURS IS 6 WEEKS

Address: _____, City _____
Phones: (H) _____ (Wk) _____ (C) _____
Email: _____
I am a ___ Student ___ Retired ___ Work: Employed by _____
Phone _____

How late at night may we call? _____

Person to contact in case of emergency:
Name: _____ Relationship _____
Phone: _____ Alternate Phone _____

I would be interested in helping RU4ME do the following: Check any items below that apply and we will talk to you to make your best match).

_____ PETSSMART Cat Room Care (once per week in the AM or PM shifts available 7 days per week to clean, feed, and socialize the cats in catroom: shifts 2-4 hours)

_____ Foster Care: Cats, kittens, dogs, (includes bottle feeding kittens); fill out Foster Application

_____ Fundraising: handing out fliers, preparing mail-outs, large fundraisers, manning collection canisters at adoptions, planning events i.e. parties in honor of pets or people.

_____ Laundry: Bedding, towels, etc.

Length of time commitment can you make to RU4ME? i.e. ___ as needed; ___ seasonal: _____;
3 months, 6 months, 1 year?

What hours are you available to volunteer?

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- Cat Room Care @ Petsmart: Indicate A.M. or P.M.
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- _____ Mon _____ Tues _____ Wed _____ Thurs _____ Fri _____ Sat _____ Sun
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Volunteer Agreement and Release:

I, _____, am requesting a volunteer position within RU4ME Pet Rescue. I agree to follow the rules and guidelines of the organization. I also recognize, understand, accept, and assume the inherent risks associated with the care and handling of animals.

I agree to not hold any director, employee, board member, individual or affiliate, and all others acting on its behalf, including but not limited to PETS MART, otherwise responsible in the event that I sustain personal injury, financial, emotional, or property loss/damage while serving the organization.

I understand that as a volunteer I am an important representative of RU4ME Pet Rescue and I must do my best to represent RU4ME in a manner that is consistent with the mission and philosophies. I agree to follow the supervision of all persons involved in volunteer management.

It is further understood and agreed that this waiver, release, and assumption of risks is to be binding on my heirs and assigns.

I have read and understand this volunteer release and agree to adhere to its entirety.

I state that I have a current tetanus shot, or I will obtain one. If I choose not to obtain a shot, I do so at my own risk.

Signature Date _____

Signature of Parent/Legal Guardian if under 18 Date _____

(Print name of Parent/Guardian)

Please attach copy of Florida Driver's License

Email: ru4mepetrescue@yahoo.com

