

# St. Francis CARE's Volunteer Application

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Age: \_\_\_\_\_ How did you hear about SFC? \_\_\_\_\_

Emergency Contacts:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Do you have any allergies we should be aware of? Yes or No

Please explain if answered yes: \_\_\_\_\_  
\_\_\_\_\_

## Understanding Our Volunteers

Do you have any pets or have you in the past?

\_\_\_\_\_

Have you volunteered anywhere before? If so where?

\_\_\_\_\_

What areas of volunteering interest you?

Walking Dogs    Cleaning    Socializing Cats    Baths    Fundraising

What do you hope to gain from volunteering with us? \_\_\_\_\_  
\_\_\_\_\_

Do you have any special skills or job training that would be useful while volunteering with St. Francis?

\_\_\_\_\_

\_\_\_\_\_

Availability:

	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
AM							
PM							

### Volunteer Responsibilities

Walking Dogs, Socializing Cats, Baths, Cleaning (sweeping, mopping, laundry, etc), folding papers used for kennels and anything else that we may need help with during your time here with us.

### Code of Conduct

We truly value you as a Volunteer and we depend on you to make our shelter successful!

We expect that you will act in a responsible manner, treating everyone equally and fairly, work as a team, communicate successfully and always feel free to ask questions or provide feedback. We reserve the right to terminate your Volunteer privileges should you not conduct yourself in a reasonable manner.

### Availability

We welcome you to come and volunteer with us as often as you would like. You are welcome to come in for an hour or so as you have time or you can schedule specific times and days that you are available so that we know when we can expect you. If you schedule a time to come in and you can't make it, please call and let us know that you are unable to be here.

### Volunteer Orientation Handout

I have received and reviewed St. Francis CARE's Volunteer Orientation Handout and understand my responsibilities as a St. Francis Volunteer.

I Acknowledge and Agree that signing a Release of Liability, Assumption of Risk, Indemnification and Waiver Agreement ("Release") is required as a condition to volunteer at St. Francis CARE. I understand there are risks in volunteering and agree to assume any and all risk and accept all liability and to indemnify and hold harmless St. Francis CARE, their respective employees, agents and other parties as set forth in the Release for any loss, liability, damage or cost which may occur as a result of any injury or claim. I represent that I have signed the Release and have done so of my own free will.

Volunteer Signature \_\_\_\_\_ Date \_\_\_\_\_

Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

(If under the age of 18, we require a Guardians signature)