**Old Dog Haven Volunteer Application**

First Name: Last Name:

Address:

Telephone Home: Cell/Other:

Email:

Best way to reach you:

Occupation:

Are you 18 years or older?

What days are you available?

What times are best for you?

Do you have dog experience and if so with what breeds/sizes of dogs?

Have you volunteered or fostered for a shelter or rescue group previously and if so which one(s).

What would you like to help with?

If interested in transporting please give your vehicle description (for making connections).

**Volunteer Agreement and Liability Waiver**

Name

Address

Home phone Cell phone

Work phone

Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Liability Waiver**

I understand that I will begin volunteering on a reciprocal trial basis. I realize that the group is depending upon my commitment. If I cannot keep that commitment I will notify the appropriate coordinator immediately. I agree that any work I perform within the scope of this agreement is provided on a voluntary basis, and that I do not expect payment or other compensation. I also understand that a volunteer position does not constitute an employee-employer relationship with Old Dog Haven, and that I serve at the discretion of the Executive Director.

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ certify that the information provided on my application is true and correct. I understand that as a volunteer for Old Dog Haven I will provide my own automobile, automobile insurance and health insurance. I hereby agree to not hold Old Dog Haven or any of its volunteers, associates, officers or foster care providers liable for any physical, emotional or property damages that are a direct or indirect result of activities involved in the placement, transport, grooming, training or evaluating of dogs in any way associated with Old Dog Haven. This includes any and all activities I perform as an Old Dog Haven volunteer. I understand that there are inherent risks when dealing with any dog for Old Dog Haven, including but not limited to dog bites.

By signing, I state that I have never been convicted of animal abuse or animal collecting, nor have I ever been convicted of a felony or of driving under the influence of an intoxicant.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Old Dog Haven Note: email application to:**

**621 SR9 NE #PMBA4 shirleys@olddoghaven.org**

**Lake Stevens WA 98258 306/653-0311 messages/fax**

[**www.olddoghaven.org**](http://www.olddoghaven.org)