

PET ALLIES VOLUNTEER APPLICATION

It is the mission of Pet Allies to aid companion animals of the Arizona White Mountains through spay/neuter programs, adoptions, placements, public education and working with other groups to ultimately stop pet overpopulation and needless death.

Our goals are to:

- . abolish pet overpopulation
- . secure quality homes for animals
- . teach responsible animal care

PA encourages the participation of individuals who support the stated mission. Potential volunteers will be interviewed prior to placement. If you agree with our mission and are willing to be interviewed and trained, we encourage you to complete this application. The information on this form will help us find the most satisfying and appropriate job for you.

Please Print

NAME	DATE					
(Last)	(First)					
HOME PHONE	WORK PHONE					
ELL PHONEE-MAIL						
BIRTHDAY (optional)	DAY (optional) EMERGENCY CONTACT					
******	* * * * * * * * * * * * * * * * * * * *					
For Office Use						
Appl Received	Orientation	· · · · · · · · · · · · · · · · · · ·				
Interview	Placement					
Training	Mentor					
Start Date						

AREAS OF INTEREST

YOUR NAME
We'd like to get an idea of which volunteer positions interest you. Sometimes there are no openings for particular volunteer positions, and sometimes circumstances – such as the hours you are available – make certain volunteer positions impractical for some individuals. Please check three volunteer positions that are your greatest areas of interest.
Fostering a pet in your home
Grooming – bathing, brushing, combing animals
Thrift Shop (Open Wednesday-Saturday, 10:00 a.m. to 4:00 p.m.)
Doing clerical support work (help with mailings, enter data onto computer data base, create forms and documents in Word), own computer and internet connection required
Matching people with pets – adoption counselor (travel to offsite adoption events in Flagstaff and Phoenix, own transportation is required)
Humane Education – youth and teacher educators, writers, designers, artists, editors, youth mentors, animal/human educators, data entry, public liaison, etc. We currently need a volunteer to head up and form this program.
Transport pets – take pets from foster homes to the veterinarian and return pets to the foster homes. Own transportation required.
Staffing a booth at an event relating pet care information to the public.
Spay/neuter assistant. Make phone calls to clients to schedule assistance for low income families to have their pets spayed and neutered. Phone card provided.
Why are you interested in becoming a PA volunteer?
Describe any previous education or work experience with animals

List present and previous volunteer work					
CURRENT EMPLOYMENT					
EMPLOYER	ADI	DRESS			
JOB TITLE	P	HONE			
TYPE OF BUSINESS	W	ORK HOURS			
DUTIES					
		 			
REFERENCES: List three refe your volunteering for PA.	rences (other thar	n relatives) whom we m	ay contact in regard to		
Name	Address		Phone		
1					
2					
3					
TIME AVAILABILITY					
I can volunteer hours per	week or hou	rs per month.			
Please indicate the days/times	which you would b	oe available:			
Mon Tue	Wed	Thu	Fri		
Sat Sun.		_ Almost any time			
Do you have any physical or medical limitations which would limit the type of volunteer activities you can do, i.e., pregnancy, back problems, etc.? Yes No					
If YES, please explain					

Are you fluent in any language(s) other than English? Yes No				
If YES, what other language(s)?				
We would be interested in any further information you might wish to offer:				
* * * * * * * * * * * * * * * * * *				
Liability Release & Waiver: I, the undersigned, understand that my participation lnc., is strictly on a volunteer basis. This may also include assisting in adoptions Pet Allies at local PetSmart stores. I understand that there are inherent risks as volunteer activities, including the risk of personal injury resulting from animal bits animal behavior. I understand that neither Pet Allies or PetSmart is responsible injury caused by any animals that I come into contact with during my volunteer whold harmless and release from liability Pet Allies and PetSmart should I become from any animals as a result of my volunteer work.	s of pets trough sociated with my es and other for any illness or vork. I agree to			
In exchange for Pet Allies' agreement to allow me to participate in its volunteer program, I hereby release Pet Allies, including its officers, agents, employees and volunteers, from any and all claims of liability of any kind whatsoever, including but not limited to claims of negligence and/or injury to me arising out of my participation in Pet Allies' volunteer program. I understand that by signing below I am waiving any and all claims of liability, including but not limited to claims of negligence and/or injury to me, against Pet Allies, its officers, agents, employees and volunteers, arising out of my participation in Pet Allies' volunteer program.				
Signature				
Date:				
MINOR CONSENT; to volunteer at Pet Allies.	give consent for			
(minor's name)				