



Celebrating
25 years
1993 • 2018
St. Francis Animal Rescue of Venice

Volunteer Application

Personal Information							
First Name			Middle Initial		Last Name		
Home Address			City		State		Zip
Home Phone		Cell Phone			DOB		
Age, if under 18		Email Address					
Educational Background							
Emergency Contact Information							
Name					Relationship		
Home Phone		Cell Phone			Work Phone		
General Information							
Do you have any pets? If yes, what kind and how many? Please include any Fosters (short and long term) you have had							
Please share special abilities, previous volunteer work, or hobbies you enjoy that may compliment our needs.							
What positions are you interested in volunteering for? Check all that apply.							
Adoption Counselor		Reception / Clerical Volunteers			Special Event Committee		
Janitorial Services (inside)		Socializing Volunteer			Special Event Participation		
Maintenance Indoor/Outdoor		Thrift Store Volunteer			Fundraising Volunteer		
Social Media Volunteer		Bottle Feeding (kittens w/o mother)			Foster Program Volunteer (at home)		
Other:							
What is your availability?							
Time	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning 7-12							
Afternoon 12-5							
Evening 5-730							

Copyright		
I agree that the copyright for any creative work done for, or on behalf of, the shelter shall remain the sole property of St. Francis Animal Rescue.		
Indemnifications		
<p>I agree to act as a volunteer for St. Francis Animal Rescue ("SFAR"). I acknowledge and agree that activities performed by me as a volunteer will be performed strictly on a voluntary basis, without any pay, compensation or benefits. I agree to comply with the rules and regulations established by SFAR and failure to do so may result in my immediate removal as a volunteer.</p> <p>I am aware of the nature of the activities to be performed as a volunteer and recognize that in handling animals and performing other volunteer tasks, a risk of harm, injury, illness or disease exists, including physical harm, illness or disease caused by animals. I agree that all volunteer activities are to be performed at my own risk. On behalf of myself and my respective heirs and personal representatives, I agree not to hold or attempt to hold SFAR or its employees responsible for any injury or damage sustained or incurred arising out of or in any way connected to my activities as a SFAR volunteer at the shelter, the Thrift store or any other location regardless of whether such injury or damage was caused by the acts or negligence of SFAR.</p> <p>If I am convicted of or plead no contest to a crime during my tenure as a volunteer, I agree to notify SFAR immediately.</p> <p>I understand that the above indemnification will apply to all minor children under my guardianship whom I allow to volunteer at SFAR.</p>		
Signature of Volunteer:		Date:
Signature of Parent or Guardian if applicant is under 18 years of age:		Date:
Signature of SFAR Volunteer Coordinator		Date:

Do not write below this line – Volunteer Coordinator's use only

Application Reviewed: _____ Shelter/Thrift Store: _____
Assignment Scheduled: _____ Name Tag Received: _____

Other important information: _____

