



## ADULT VOLUNTEER APPLICATION

How did you hear about STAR?

### Please provide us with your contact information:

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

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

Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Alternate Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_

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

What is the best number at which to contact you? \_\_\_\_\_

What skills do you wish to offer STAR? (Please select ALL that apply!)

- Feeding and Kennel Chores
- Dog Training/Handling
- Dog Walking
- Laundry
- Office Work
- Thrift Store Help
- Fundraising
- Education
- Public Relations
- Other:

Additional Comments:

Why do you want to volunteer?

What do you expect to get out of volunteering for STAR?

What days and times are you available?

### Please provide us with Emergency Contact information:

Contact's Name: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_

Work Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_

What is your Occupation?

What is your Date of Birth? \_\_\_\_/\_\_\_\_/\_\_\_\_\_

Do you have any special conditions, limitations, or medications that STAR should be aware of such as asthma, bee allergies, heart conditions, etc? Yes No (if YES, please explain)

Do you have any psychological issues that STAR should be made aware of? Yes No (If YES, please explain)

Do you have a current Tetanus Vaccine (required)? Yes No

Do you have any additional vaccines relevant to animal work? Yes No (If YES, please explain)

Have you ever been convicted of a crime? Yes No (If YES, please explain)

Have you ever had a PFA against you? Yes No (If YES, please explain)

Have you ever been convicted of sexual offenses? Yes No (If YES, please explain)

Have you ever been convicted of animal cruelty? Yes No (If YES, please explain)

Do you authorize STAR to run a background check on you? Yes No

If YES, please provide the following information for a background check:

Driver's License No.: \_\_\_\_\_

Social Security No.: \_\_\_\_\_

Have you ever had to take an animal to a shelter? Yes No (If YES, please explain)

Please provide TWO (2) personal references not related to you (i.e., employer, local animal welfare group, other volunteer organization).

Reference #1

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

Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_

Reference #2

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

Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_

I understand that if I am approved as a volunteer, I must sign the STAR Acknowledgment of Confidentiality form and the STAR Participant Agreement (available on the STAR website) before I can start any volunteer work.

I certify that I have read the STAR Rules & Regulations (available on the STAR website).

I certify that the above information is true and accurate to the best of my knowledge and that any misleading or false information contained in this application could lead to my dismissal. Yes No

SIGNATURE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_



## **PARTICIPANT AGREEMENT, RELEASE, & ACKNOWLEDGEMENT OF RISK**

In consideration of the services of Street Tails Animal Rescue, their agents, owners, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as "STAR"), I hereby agree to release and discharge STAR, on behalf of myself, my children, my parents, my heirs, assigns, personal representatives and estate as follows:

1. I understand and acknowledge that any animal or rescue related activity may entail both known and unanticipated risks which could result in physical or emotional injury, paralysis, death, or damage to me, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.
2. I certify that I have read the information below regarding Potential Risks attached hereto and a part of the Agreement. I acknowledge that I understand the Potential Risks described and that I indemnify and hold STAR harmless from any liability for such risks.
3. I understand and acknowledge that: (a) STAR has difficult jobs to perform and that, although STAR always tries to maintain the highest safety standards, they are not infallible; (b) STAR may be ignorant or uninformed about a participant's fitness or abilities; (c) STAR might misjudge the weather, the elements, or the terrain at any given time; (d) STAR may fail to give adequate warnings or instructions; and (e) the equipment being used in any STAR activities could malfunction without warning.
4. I expressly agree and promise to accept and assume all of the risks existing in activities at STAR. My participation in activities at STAR is purely voluntary, and I elect to participate in spite of the risks.
5. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless STAR from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of STAR's equipment or facilities, including any such claims which allege negligent acts or omissions of STAR.
6. Should STAR or anyone acting on their behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless to such fees and costs.
7. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating in activities at STAR, or else I agree to bear the costs of such injury or damage myself. I further certify that I have no medical or physical conditions which could interfere with my safety in activities at STAR, or else I am willing to assume and bear the costs of all risks that may be created, directly or indirectly, by any such condition.



**POTENTIAL RISKS OF STAR ACTIVITIES**

**1. Animal-Related Risks**

STAR rescues a variety of animals to which volunteers may be exposed in the course of their activities at STAR. ALL animals of ALL types carry risks that may result in serious injury, illness, or even death. All animals can be unpredictable regardless of prior behavior and characteristics due to a variety of causes such as fear, injury, or illness. Risks may include, but are not limited to, the following: bites, scratches, maulings, broken bones, pulled or sprained muscles, rabies, allergies, tick-borne Lyme Disease, and bacterial or fungal infections.

**2. General Risks**

Rescue settings in general may carry potential risks which could result in injury, illness, or death. These risks include, but are not limited to, the following: malfunctioning of equipment, receipt of First Aid and/or emergency treatments, risks associated with the consumption of food and beverages on the premises, and the unpredictable actions of others not under the control of STAR.

**SIGNATURES**

By signing this Agreement, I acknowledge that if anyone is hurt or property is damaged during my participation in activities at STAR, I may be found by a court of law to have waived my right to maintain a lawsuit against STAR on the basis of any claim from which I have released them herein. I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.

**PARTICIPANT:**

Name (Please print): \_\_\_\_\_

Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PARENT'S OR LEGAL GUARDIAN'S**

**ADDITIONAL INDEMNIFICATION & RELEASE:**

*(Must be completed for participants under the age of 18)*

In consideration of \_\_\_\_\_ (print minor's name) ("Minor") being permitted by STAR to participate in its activities and to use its equipment and facilities, I further agree to indemnify and hold harmless STAR from any and all Claims which are brought by or on behalf of Minor and which are in any way connected with such use and participation by Minor.

Parent's or Legal Guardian's Name (Please print): \_\_\_\_\_

Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_