



JUNIOR VOLUNTEER APPLICATION

How did you hear about STAR?

Please provide us with your contact information:

Name: _____

Address: _____

Phone: () _____ - _____ Alternate Phone: () _____ - _____

Email: _____

What is your Date of Birth: ____/____/_____

Do you currently own a dog or cat? Dog Cat How many? Dog(s) ____ Cat(s) ____

How many years of experience do you have (if any)? ____

Do you know how to:

Properly walk a dog? Yes No

Brush a dog? Yes No

Sweep/Mop? Yes No

Please provide any additional information about your skills and experience with any kind of animals.

What other hobbies do you have (not animal-related)?

Why do you want to volunteer at STAR?

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

What are some activities that you would like to experience with STAR?

Do you have any special conditions, limitations, or medications that STAR should be aware of (i.e., asthma, bee allergies, etc.)? Yes No (If YES, please explain)

You are required to have a Tetanus Vaccine.

Please indicate the date of your last vaccine: ____/____/_____

Please provide us with the contact information for your Parent or Guardian:

Parent/Legal Guardian Name: _____

Home Phone: () _____ - _____ Cell Phone: () _____ - _____

Work Phone: () _____ - _____ Email Address: _____

STAR does NOT guarantee your safety.

I understand that my parent/legal guardian and I must read and sign the STAR Participant Agreement, Release, and Acknowledgment of Risk (available on the STAR website) before I can begin any volunteer activities at STAR. Signature of Parent/Guardian: _____

I certify that I have read the STAR Rules & Regulations (available on the STAR website).
Signature of Parent/Guardian: _____

I certify that the above information is true and accurate to the best of my knowledge and that any misleading or false information may lead to my dismissal.
Signature of Parent/Guardian: _____

Volunteer Signature: _____

Print Name: _____

DATE: ____/____/____

Parent/Guardian 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: _____