



VOLUNTEER APPLICATION



Date: _____ If you are under 18 please list your age: _____

NAME: _____

STREET ADDRESS: _____

Please check your preferred contact method:

HOME PHONE: _____ WORK PHONE: _____

CELL PHONE: _____ EMAIL ADDRESS: _____

EMERGENCY CONTACT: NAME _____ PHONE _____

PETS THAT YOU CURRENTLY HAVE AT HOME: Dogs Cats Other: _____

Would you prefer to work with: DOGS CATS BOTH

We have 3 shifts per day, which do you prefer:

(Each shift will take at least 2 hours to complete)

Morning (arrival time 7:30-8:30 a.m.)

Afternoon (arrival time 1:30-2:30 p.m.)

Evening (arrival time 6:30-7:30 p.m.)

Willing to be trained for a shift but would rather be on call as a substitute.

Socialization - spending short periods of quality time with dogs (short walks, limited cleaning of kennels, etc.) or cats (visiting in cat and kitten room, limited cleaning)

What reasonable time period are you willing to make a commitment to working a morning or evening shift: _____ (1, 2, 3, etc hours)

Do you consider it important and agree to contact the appropriate L. I. F. E. House personnel within 24 hours or more if you will not be able to cover your assigned shift? _____ (response and initials, please)

****Emergencies and illnesses are expected.****

Talents that you would like to share with L. I. F. E. House: Crafts Painting Carpentry Work Decorating Periodic housekeeping/cleanup-preparation for events Groom animals Grant writing Advertising Public relations Help with fundraising events/asking for donations Recycling Promotion & Transportation Public speaking Other: _____

All Information is Confidential and Strictly for our Volunteer Files.

Please submit:

By email: Jeanine@lifecyclehouse4animals.org

By mail: **L.I.F.E. House, Attn: Vol. Coord., P.O. Box 1365, Frankfort, KY 40602-1365**

LIFE House for Animals
Volunteer Waiver and Release Form

I, _____, the undersigned, agree to release, discharge, indemnify, and hold harmless the L.I.F.E. House for Animals, a non-profit Kentucky Corporation with its principal place of business being located in Frankfort, Kentucky, its officers, director, and employees for any and all claims, demands, losses, costs, liabilities, settlement agreements, damages, expenses and suits at law or inequity that arise out of my voluntarily performing services for the L.I.F.E. House for Animals, its officers, directors, or employees.

I recognize that in handling animals while performing services for the L.I.F.E. House for Animals, there exists a risk of injury including, but not limited to, personal physical harm. On behalf of myself, my heirs, assignees, guardians, and personal and legal representatives and executors, I hereby release, discharge, indemnify, and hold harmless the L.I.F.E. House for Animals, its officers, director, and employees for any and all claims, demands, losses costs, liabilities, settlement agreements, damages, expenses connected with my services to the L.I.F.E. House for Animals whether caused directly or indirectly by any negligence (active or passive) attributable to the L.I.F.E. House for Animals, its officers, directors, or employees.

I acknowledge that I have been advised and encouraged to consult with my physician regarding: tetanus vaccinations, rabies prophylaxis, and possible allergic reactions.

I acknowledge that I have read and fully understand the terms and conditions of this Waiver and Release, which I agree, and will comply with same.

Volunteer Signature/Date: _____

Volunteer Name (Print): _____

Parent/Legal Guardian if younger than 18 years of age: _____

Volunteer Coordinator Signature: _____