

Lifelong Friends Pet Adoptions

PO Box 4100 - 20803 FM 1431 Lago Vista, TX 78645 - 512-267-6876 - www.lifelongfriends.org

Volunteer Application

How Do I Volunteer?

LIFELONG FRIENDS PET ADOPTIONS (formerly Lago Vista Pet Adoption and Welfare Service, Inc.) greatly values its volunteers. Without our volunteers, the shelter would not function. Please read the enclosed material carefully and complete the application.

Return the application to:

Lifelong Friends

Attn: Volunteer Coordinator

PO Box 4100

Lago Vista, Texas 78645

Steps to Becoming a Volunteer

1. Complete and return the Volunteer Application.
2. Be interviewed by the Volunteer Coordinator.
3. Read and sign the Volunteer Agreement.
4. Read and sign the Release of Liability.
5. Attend a Volunteer Orientation Session.
6. Attend any additional training classes as required for specific activities.

Orientation and training sessions are conducted as needed.

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Volunteer Application

APPLICANT'S NAME:			DATE:
Address:			
City, State, Zip:			
Phone Contact:	(Home)	(Work)	(Cell)
E-mail:			

Do you have any allergies or physical conditions that might affect your volunteer work?

If so, please describe.

In an emergency, please notify:

CONTACT NAME & RELATIONSHIP:			
Address:			
City, State, Zip:			
Phone Contact:	(Home)	(Work)	(Cell)

Please list two personal or business references:

REFERENCE NAME:			
Address:			
City, State, Zip:			
Phone Contact:	(Home)	(Work)	(Cell)
E-mail:			
REFERENCE NAME:			
Address:			
City, State, Zip:			
Phone Contact:	(Home)	(Work)	(Cell)
E-mail:			

Are you acquainted with a Lifelong Friends volunteer?

Name:		Relationship:	
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Have you adopted an animal from Lifelong Friends?

If so, who did you adopt?

Are you a member of any other animal welfare organization?

If yes, how do you participate?

How did you hear about the Lifelong Friends Volunteer Program?

If you are here to earn volunteer credits for school or some other organization, please complete the following:

Agency/School:		Address:	
Name of Contact Person:		Phone:	
Number of hours you are required to work:			

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Skills and Experience

Have you had any formal education in pet care or animal welfare?

Where:	When:
Type of Training:	

Have you done any other volunteer work?

Where:	When:
Type of Training:	

Areas of Interest:

Please check all that apply. Lifelong Friends needs volunteers in many areas. Please check the programs that you believe would best utilize your skills and talents.

Board Potential Skills

- Financial Management
- Strategic Planning
- Policy Development
- Fundraising
- Grant Writing
- Marketing / Public Relations
- Human Resources
- Office Management
- Lobbying / Political Action
- Organizational Governance
- Legal Assistance

Coordinator Potential Skills

- Medical Officer
- Adoption Management
- Foster Management
- Feral Cat Management
- Office Management

Support Services

- Office / Administrative / Clerical
- Computers
- Web Design
- Photography / Videotaping
- Event Planning

Dog Caregiving

- Adoption Counseling
- Kennel Cleaning
- Feeding
- Medicating
- Socialization
- Dog Walking
- Dog Grooming
- Dog Training
- Foster Care

Cat Caregiving

- Adoption Counseling
- Cage Cleaning
- Feeding
- Medicating
- Socialization
- Cat Grooming
- Foster Care

Other (Please specify.) _____

Please include any additional information about your skills and experience that may assist us in placing you:

Availability

Please circle the days/times you are available for volunteer work:

Weekly Bi-Monthly Monthly

Sunday Monday Tuesday Wednesday Thursday Friday Saturday

8:00 – 11:00 AM

5:00 – 9:00 PM

Comments:

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Why do you want to volunteer with Lifelong Friends?

Have you ever been a volunteer at Lifelong Friends before?

If so, when? _____

If YES, what was your reason for leaving? _____

Volunteer Printed Name

Volunteer Signature

Date

Parent or Guardian's Signature:*

Date

**Volunteers under 18 years of age must have parental approval.*

Lifelong Friends Representative

Date

Please understand that completion of this application does not guarantee placement. Lifelong Friends fills the positions and time slots that are needed.

Accuracy and completeness of this form are important in determining the acceptability for a volunteer position with Lifelong Friends. Please be neat in completing this form. You may be requested to submit additional references and participate in additional interviews, all of which are considered part of the qualification process. All pre-placement inquiries are made for the purpose of establishing your qualifications for placement with Lifelong Friends. Your volunteer application will receive full evaluation, and you will be considered in competition with other applicants for any vacant volunteer position for which you may qualify.

Thank you for contacting us. We look forward to working with you to make the world a more humane place for all animals.

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Volunteer Application

Volunteer Agreement

Updated 1.1.09

I, the undersigned, hereby agree to accept a position as a volunteer for **Lifelong Friends Pet Adoptions (formerly Lago Vista PAWS)** and in so doing:

- ◆ I agree to abide by the shelter's policies and procedures. *Initials (_____)*
- ◆ I agree to be supervised by the Volunteer Coordinator/designee and will directly report any problems that arise to the Volunteer Coordinator/designee. *Initials (_____)*
- ◆ I agree to be present for scheduled shifts and to carry out duties promptly and carefully. I will notify the Volunteer Coordinator/designee with as much advance notice as possible if I need to be absent or go on an extended leave. *Initials (_____)*
- ◆ I agree to treat all animals and volunteers with respect and conduct myself in a courteous and professional manner. *Initials (_____)*
- ◆ I authorize Lifelong Friends to seek emergency medical treatment in case of accident, injury, or illness. I waive any and all liability for injuries or illness incurred while performing volunteer services. *Initials (_____)*
- ◆ I agree to seek immediate emergency medical treatment in the event I am involved in an accident or I am injured when working on the shelter property or at a shelter event. *Initials (_____)*
- ◆ I will maintain the dignity and integrity of Lifelong Friends with the public and keep confidential all information obtained in the course of my volunteer service. *Initials (_____)*
- ◆ I understand that records regarding previous and new pet owners are to be kept confidential. *Initials (_____)*
- ◆ I understand that I may, at any time, be removed, with or without cause, from my position as a volunteer at the sole discretion of Lifelong Friends Management Team or Board of Directors. *Initials (_____)*

I acknowledge that my services are provided strictly on a volunteer basis, without pay or compensation of any kind, and without liability of any nature on behalf of Lifelong Friends, all services to be performed by me at my own risk.

Volunteer Name (Please print.)

Volunteer Signature

Date

Parent or Guardian's Signature*

Date

**Volunteers under 18 years of age must have parental approval.*

Lifelong Friends Representative

Date

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Volunteer Services Release of Liability

Updated 1.1.09

I, _____, wish to volunteer my time and services to **Lifelong Friends Pet Adoptions (formerly Lago Vista PAWS)** in the interest of public service. My time and services are volunteered free of charge.

I understand that I may be handling animals as part of my volunteer service. I will notify Lifelong Friends staff within 12 hours of any injury. I waive all claims against Lifelong Friends, its officers, directors, and volunteers, for any injuries I might receive while handling any of the animals and for any injuries that might be sustained en-route to or from the locations at which my services will be utilized.

I understand that if a certain animal makes me uncomfortable, I am not obligated in any way to enter that animal's cage/kennel or work with that animal. I will quickly notify Lifelong Friends staff of any animal I am uncomfortable working with, so that the animal can receive the necessary care it requires from a staff member or another volunteer.

I will heed any instructions given to me when performing tasks for Lifelong Friends, its officers, directors, and authorized volunteers.

Volunteer Name (Please print.)

Address (Street, City, State, Zip)

Phone (Work, Home, Cell)

E-mail Address

Volunteer Signature

Date

Lifelong Friends Representative

Date

Minors may be allowed to participate in dog and cat caregiving. Minors have been oriented to the facility, and have been instructed not to have contact with any dogs or cats unless specifically instructed to by an adult caregiver. Friends may not visit the volunteer at the shelter. Minors should not be on the shelter grounds or in the shelter unless an adult supervisor is present. Minors must never put hands or fingers through the kennels to touch the animals. When feeding and watering dogs, the dogs must be shut outside while the minor is feeding and watering. Cats may be handled with permission of the adult supervisor. Even with the above precautions, animal scratches or bites may occur. Parents may not hold Lifelong Friends, its officers, directors, or volunteers responsible.

Parent or Guardian's Signature*

Date

**Volunteers under 18 years of age must have parental approval.*

Volunteer Position: _____

Work Schedule: _____