

CRITTERAID

Box 235 – 113 – 437 Martin Street . Penticton . BC . V2A 5L1

Ph: 250.494.5057 . www.critteraid.org or info@critteraid.org

By completing this form, you are registering as a volunteer with Critteraid. Please take a few minutes to complete the following application. We will review your application and contact you about your particular interests. Please note that most programs require that volunteers be 19+ years unless accompanied by a parent/guardian or with written consent from parent/guardian.

If you would like to receive information on future training, please check the appropriate box: Yes No

Are you a member of Critteraid? Yes No

VOLUNTEER APPLICATION

NAME:		DATE:
COMMUNITY	DRIVER'S LICENSE NO. or S.I.N.	Are you licensed to drive anything other than a car? <input type="checkbox"/> No <input type="checkbox"/> Yes If so, what? _____
ADDRESS:	CITY:	PROVINCE/POSTAL CODE:
MAILING ADDRESS (if different from above):		EMAIL:
Home Phone No.	Work Phone No.	Cell No.
1. Skills and Interests: Occupation: _____ Educational Background: _____ Applicable Skills: _____ Do you have any animals? <input type="checkbox"/> If yes, please describe: _____ _____ Previous Volunteer Experience: _____ _____ Why are you interested in volunteering with Critteraid? _____ _____		

2. Availability:

When are you available to volunteer? (Check one or more):

Weekday _____ **Evening** _____ **Weekend** _____ **Flexible** _____ **Specific Events Only** _____ **Other** _____
How many hours a week can you volunteer? _____ **Do you have transportation?** _____

3. References:

How did you hear about Critteraid? (specify):

Please provide two personal/professional references we may contact:

Name: _____ **Phone No.** _____

Name: _____ **Phone No.** _____

4. Volunteer Activities:

Cleaner (Summerland Cat Sanctuary)

Cat Brusher/Cuddler (Cat Sanctuary)

Cat Attendant (cutting nails, etc.)

Dog Attendant (cleaner, walker, groomer)

Equine Attendant (horses, donkeys, alpaca)

Gardener (Cat Sanctuary)

Lawn Mower (Cat Sanctuary)

Office Help (Cat Sanctuary)

Foster Home (Cats)

Foster Home (Dogs)

Foster Home (Other) _____

Foster Home Coordinator (all animals)

Adoption Advertising Coordinator

Coatcheck

Media Coordinator (Press Releases, etc.)

Event Coordinator

Crafter

Public Displays (Malls, etc.)

Public Displays (Food Concessions)

Baker (for bake sales)

Charity Tin Volunteer

Raffle Ticket Seller

Phone Committee

Membership Assistant

Solicit Prize Donations

Grant Applications

**Create and Mail Special Event Notices,
Newsletters, Donation Appeals, etc.**

Oversee Youth Project

Humane Education (teaching)

Writing for Newsletters

Emergency Animal Rescue

Specialty Services Needed: Legal _____	Painting _____
Computer/Printing/Copying/Clerical _____	Photography _____
Accounting _____	Plumbing _____
Medical _____	Electrical _____
Are you willing to be a coordinator for a particular Program? _____	Artist _____
	Carpenter _____

SIGNED: _____

IN CASE OF EMERGENCY

Contact: _____ Relationship: _____

Address: _____ Phone No: _____

MEDICAL INFORMATION

Do you have Health Insurance? ____ Yes ____ No Carrier: _____

Do you have a current Tetanus Vaccination? ____ Yes ____ No Year Last Vaccinated: _____

Are you on any long term medication that we should be aware of? ____ Yes ____ No Please explain:

Do you have any medical allergies or non-medical allergies that we should know about? _____

ANIMAL HANDLING EXPERIENCE

___ Dogs ___ Cats ___ Feral Cats ___ Horses ___ Donkeys ___ Sheep
___ Goats ___ Cattle ___ Pigs ___ Birds ___ Reptiles - Type _____
___ Exotic Animals - Type _____ Wildlife - Type _____

Have you ever humanely trapped animals? _____

FOR OFFICE USE ONLY

AGREEMENT

As a volunteer with Critteraid, I agree to the following:

- ^ To represent Critteraid in a professional manner.
- ^ To follow the rules and procedures set up by Critteraid during my volunteer time.
- ^ To respect Critteraid's right to terminate me as a volunteer should it be determined that I am in conflict with the goals of the Society. Critteraid has the right also, to terminate volunteers if it is determined to be a threat to the health and well-being of the volunteer.
- ^ To return to Critteraid any property belonging to the Society upon request. Any property not returned will be billed to me for the full value. A person cannot volunteer again until all supplies are returned in good condition.
- ^ I understand that any photographs that I may take as a result of my volunteer work will be the property of Critteraid and that I must seek permission from a Director to use any photographs for my own personal/professional use.
- ^ To use equipment and facilities belonging or being used by Critteraid in a manner not to damage or destroy them. Volunteers are responsible for replacing and/or repairing any property they intentionally damage or destroy.
- ^ I will not represent Critteraid to the media without approval of a Director of the Society.
- ^ I will not abuse or neglect any animal in trauma in the care of Critteraid when volunteering.
- ^ I will not cause bodily harm to any other volunteer or individual cooperating with Critteraid. Under no condition will volunteers be allowed to bring guns, hunting type knives, or bows and arrows to any Critteraid volunteer scene or to any Critteraid sanctuary or designated other location.
- ^ Alcohol and illegal drugs are not permitted to be used at any time when you are volunteering with Critteraid. If a volunteer violates either, they will be dismissed as a volunteer.
- ^ Smoking is not permitted in any Critteraid sanctuary. This is for the protection of the animals and other volunteers. There will be areas designated for smoking. Smoking is not permitted during rescue work either, especially when working in areas where there is a threat of gas or other fuel leaks.

I have read the above conditions and agree to abide by them while volunteering with Critteraid.

Volunteer

Date

Because the Volunteer is presently under 19 years of age, additional permission must be provided by the parent or guardian. By doing so, the parent/guardian and the minor volunteer waive any liability to Critteraid, it's divisions, partners, directors and other volunteers.

Signature of Parent/Guardian of Minor Volunteer

Date

Pursuant to the Freedom of Information and Protection of Privacy Act, personal information collected on this form is for the purpose of processing this application form and for administration and enforcement.