

# Animal Rescue Alliance

& FARM SANCTUARY

## Volunteer Application – Please Print Legibly

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

Address: \_\_\_\_\_ City & Zip: \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Age Group: 15-20 \_\_\_\_\_ 21 + \_\_\_\_\_ Do You Drive: YES \_\_\_\_\_ NO \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Tele#: \_\_\_\_\_

Previous Volunteering Experience: \_\_\_\_\_

### **I WOULD LIKE TO VOLUNTEER MY TIME FOR THE FOLLOWING:**

Fostering Animals: \_\_\_\_\_ Cleaning Animal Areas: \_\_\_\_\_ Fundraising: \_\_\_\_\_

Other (specify): \_\_\_\_\_

### **I AM AVAILABLE THE FOLLOWING DAYS/TIMES TO VOLUNTEER:**

Monday \_\_\_\_\_ Time \_\_\_\_\_

Tuesday \_\_\_\_\_ Time \_\_\_\_\_

Wednesday \_\_\_\_\_ Time \_\_\_\_\_

Thursday \_\_\_\_\_ Time \_\_\_\_\_

Friday \_\_\_\_\_ Time \_\_\_\_\_

Saturday \_\_\_\_\_ Time \_\_\_\_\_

Sunday \_\_\_\_\_ Time \_\_\_\_\_

I understand that The Animal Rescue Alliance (TARA) is not responsible for any illness or injury caused by any animals that I come into contact with during my volunteer work. I agree to hold harmless and release from liability The Animal Rescue Alliance should I become sick or injured from any animal as a result of my volunteer work.

\_\_\_\_\_  
Signature (If under 18, Parent's Signature Required) Date: \_\_\_\_\_