



First and Last Name:

D.O.B./Age

Street Address

City:

State:

Zip:

Home Phone:

Work Phone:

Cell phone:

Email Address:

Employer/Job Title:

May we contact for reference:

Yes

No

N/A

If yes, please provide name and phone # of employer:

Allergies or physical restrictions:

How did you hear about Stand Up Pups?

What ideal volunteering do you want to do at Stand Up Pups?

Volunteer Work Preferences: (check all that apply)

Pet Transport (to and from vet apts, from shelter, etc,)

- Dog Walking
- Foster care (please fill out foster app)
- Computer/Website
- Graphic Designer
- Special Events
- Event Planner
- Corporate Sponsor Ambassador
- Community Outreach
- Social Media Ambassador
- Dog Ambassador (post about specific dogs up for adoption)

Do you work with any other rescue organizations, if you which ones?

- Yes
- No

Please list any pets you currently own (or have owned in the past).

Animal Experience: (check all that apply)

- Veterinary Hospital
- Boarding Facility
- Foster Home
- Dog Grooming
- Cat Grooming
- Shelter Work
- Training/Obedience
- Pet Sitting
- Farm Animals
- Other
- None

If you would like to comment more on your experience with the above, please do so here:

If you listed other, please explain:

Other Experience, Special Skills, Strengths, Talents: (check all that apply)

- Computers
- Management
- Crafts
- Working w/animals
- Graphic Arts
- Painting
- Photography
- Writing
- Secretarial
- Fund-raising
- Public Speaking
- Other

If you would like to comment more on your experience with the above, please do so here:

If you listed other, please explain:

When are you available to volunteer? (check all that apply)

Weekdays

Weekends

Reference #1 (Name, phone # and relationship to self)

Reference #2 (Name, phone # and relationship to self)

Any additional comments:

In case of emergency, who should we contact? (name and phone #)

This volunteer agreement (“Agreement”) is entered into as of the date set forth below by Stand Up Pups. WHEREAS, the Volunteer has voluntarily contacted SUP and has expressed an interest in working with dogs in the care and custody of SUP. In consideration of SUP's agreement to allow the volunteer to view and/or interact with such dogs, the volunteer hereby, for his/her heirs, his/her personal representatives, and him/herself represent and warrant as follows: 1. The volunteer is fully aware of the risks that dogs pose and have elected to view and/or interact with one or more dogs in the care of SUP voluntarily. The volunteer knowingly assumes all risks that exposure to dogs may pose, including but not limited to serious bodily injury and/or death. 2. THE VOLUNTEER HEREBY WAIVES, RELEASES DISCHARGES, HOLD HARMLESS, AND PROMISES TO INDEMNIFY AND NOT TO BRING SUIT AGAINST TLR, its directors, officers, volunteers, staff, and all other agents, and attorney for any of the referenced parties and any other parties acting for or on behalf of the referenced parties from an and all rights and claims which the volunteer has or which may hereafter accrue to the volunteer and from any and all damages which may be sustained by the volunteer directly or indirectly in connection with, or arising out of, the volunteer’s exposure to such dogs.

By writing your name here, you are agreeing to the above liability waiver.

By writing your name here, you are stating that you are the parent/guardian of the above applicant and you grant your permission for them to volunteer with The Last Resort Rescue.

Anything else you would like to say, please note it here: