

OrangeBone Volunteer Application



Name: _____

Address: _____

Home Phone: _____

Work/Cell Phone: _____

Email: _____

Entered Data (Office Use Only) _____

Availability:

Please indicate the hours of your availability.

Volunteer shifts can vary between 1 and 4 hours in length.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Number of days you'd like to volunteer per week:

- One day
- Two to Four days
- Five or more days

Occupation: _____

What is your level of experience with dogs? (check one):

- Beginner
- Adequate
- Advanced _____

Have you ever volunteered for an organization? **Yes** **No**

If yes, which one(s) and what were your tasks? _____

How did you hear about OrangeBone? (check all that apply)

- Friend
- Internet
- TV, Newspaper, Other media
- Other _____

Why are you interested in volunteering for OrangeBone? _____

Do you have any special skills?

Please check all that apply

- | | |
|---|---|
| <input type="checkbox"/> Dog Training | <input type="checkbox"/> Grant Writing |
| <input type="checkbox"/> Dog Grooming | <input type="checkbox"/> Handy person |
| <input type="checkbox"/> Licensed Veterinarian Services | <input type="checkbox"/> Volunteer Management |
| <input type="checkbox"/> Research | <input type="checkbox"/> PR/Marketing |
| <input type="checkbox"/> Photography | <input type="checkbox"/> Editing (Film/Photo) |
| <input type="checkbox"/> Media Expertise | <input type="checkbox"/> Other _____ |

Which of the following projects interest you?

Please check all that apply

- | | |
|---|--|
| <input type="checkbox"/> Dog Walking | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Dog Training | <input type="checkbox"/> Media/Fundraising |
| <input type="checkbox"/> Shop Help (Cleaning) | <input type="checkbox"/> Writing |
| <input type="checkbox"/> Fostering | <input type="checkbox"/> Other _____ |

In case of emergency, whom should we contact? _____

Relationship: _____ Phone number(s): _____

Please sign and date below:

SIGNATURE

DATE

Please feel free to attach a résumé to your application.

Thank you for you interest in OrangeBone!



Volunteer Release Form
(To be completed with the Volunteer Application)

Volunteer Name: _____ **Day Phone:** _____
(Please print legibly)

LIABILITY RELEASE- I hereby release, indemnify, and hold harmless OrangeBone its officers, directors, agents, servants, employees, and all volunteers from any and all liability for any injury I may suffer (including any injury caused by negligence) in conjunction with my volunteer time during any volunteer activity. I acknowledge this also includes transportation of any sort for OrangeBone and that I am responsible for my own vehicle, insurance coverage, damages, liability, bodily injuries while in the vehicle or damages, liability, bodily injuries to any other vehicle.

I certify that I am in good health and able to volunteer my time for OrangeBone. I certify that I am 18 years or older and am competent to contract my name insofar as the above is concerned. I have read the foregoing release, authorization and agreement, before affixing my signature below and warrant that I fully understand the contents thereof.

Signature: _____ **Date:** _____

COMMUNICATIONS RELEASE- I hereby waive any claim to the rights of video and/or photographic recording(s) made of me during my volunteer time with OrangeBone. I hereby authorize the editing, duplication, reproduction, copyright, exhibition, broadcast and/or nonprofit use and distribution of said recording(s) for purposes deemed suitable by OrangeBone.

I hereby waive any right to approve the finished products. I hereby certify that I am 18 years of age or older and am competent to contract my own name insofar as the above is concerned. I have read the foregoing release, authorization and agreement, before affixing my signature below and warrant that I fully understand the contents thereof.

Signature: _____ **Date:** _____

PARENTAL CONSENT/RELEASE- If the individual is a minor (under 18 years of age), the following should be signed by a parent or legal guardian.

I hereby consent and agree, individually and as a parent or legal guardian of to all the terms and provisions above.

Signature: _____ **Date:** _____

Name: _____ **Relationship to minor:** _____
(Please print legibly)

Home Address: _____ **Day Phone:** _____