

Sara's Sanctuary

an animal rescue organization

A 501 (c) 3 non-profit corporation. Fed. ID # 91-2047487

23515 NE. Novelty Hill RD B221 #310

Redmond, WA 98053

www.Saras-Sanctuary.org



Volunteer Application

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Name: _____ Today's Date: _____

Primary Phone: _____ Cell: _____

Home Address: _____

Best time to call: _____ E-mail Address: _____

Birth date: _____ (all onsite volunteers must be 18 years of age or older)

What languages do you speak? _____

Employer: _____ Phone #: _____

Do you have health insurance? _____ Insurance Company: _____

Emergency Contact Information:

Name: _____ Phone #: _____ Relationship: _____

How often are you able to volunteer? Once a weekly / once a Month / Occasionally : _____

Volunteer shifts are Tuesdays, Thursday & Saturdays - 11:00 to 2:00: what days are you available?

Tuesday 11:00 to 2:00 _____ Thursday 11:00 to 2:00 _____ Saturday 11:00 to 2:00 _____

What date are you available to start volunteering? _____

How did you hear about Sara's Sanctuary? _____

Why are you interested in volunteering? _____

Do you have any formal education or training in pet care or animal welfare? _____ If yes, please explain: _____

If you have volunteer experience, please list the name of the organization(s) you have volunteered with: _____

List your volunteer responsibilities: _____

List your supervisor's name and phone number: _____

Note the reason(s) you left: _____

For Internal Use:

Date contacted: _____ Notes: _____

Start Date: _____

Project: _____

Do you have any pets? _____ If so, what species? _____

Can you provide proof of vaccination status from your veterinarian if needed? _____

Do you have any physical, medical, psychological limitations or disabilities that might hinder you from safely participating in any area of the volunteer program or that may put you at risk when working with any type of animal or other volunteers? If yes, please explain. _____

Have you had a recent tetanus shot or booster? _____ Date: (if known) _____

If you will be working with the animals and have not received a shot within the last 3 years, do you agree to see your doctor and receive a tetanus shot in the first month of volunteering? _____

Sara's Sanctuary provides a home for a variety of animal species, that can be unpredictable. **Are you comfortable working with animals that will bite, kick and scratch?** _____

Have you ever been convicted of a felony of any kind of a misdemeanor? If yes, please explain. _____

If you are volunteering at Sara's Sanctuary as a community service or court ordered requirement, please explain the nature of your service requirements and/or infraction. Please provide the name and phone number of a contact person, as well as the number of service hours required. This information is required with this application. Without it, we will not sign off on any hours served. _____

Please check ALL areas you would be interested in:

Animal Care (most require a weekly 4 hour commitment)

- Livestock and Poultry care (feeding, cleaning enclosures)
- Food prep (sorting, chopping, storage)
- Avian animal care (feeding, cleaning enclosures)

Office/Technical Assistance

- Flyer/brochure/newsletter creation
- Computer assistance (website, data entry)
- Office work (copying/filing/ mailing)
- Photography
- Videographer

Onsite Sanctuary Assistance

- Landscaping
- Property Maintenance
- Painting
- Electrical assistance
- Plumbing
- Pull weeds in pasture (easy to remove)
- Basic cleaning (clean kitchen, food bowls, etc)
- Wash windows on animal enclosures (Plexiglas)

Errands/Transportation

- Pick up produce & transport to sanctuary
(Truck/Van/SUV recommended, some cars ok)
- Pick up feed and supplies for sanctuary
(Truck/Van/SUV recommended, some cars ok)
- Laundry (wash/fold towels and blankets)
- Extra cleaning of food containers doors, crates.

Other

Fundraising _____ Grant Writing _____ Events _____ Publicity _____ website _____

If you have checked one of the areas, do you have any experience in these fields? _____

Volunteer Agreements:

- I agree to follow the mission, rules, policies, regulations and procedures of Sara's Sanctuary at all times.
- I realize I can be injured, by volunteering at Sara's Sanctuary. I understand that I can be badly bitten, scratched, poked and kicked. I assume these risks, with any and all connection with my volunteer work at Sara's Sanctuary.
- I will not hold Sara's Sanctuary or its directors, officers, agents, related parties or associates responsible for any injuries, damages, liabilities, losses, judgments, costs, or expenses whatsoever that I might suffer or sustain in connection with my volunteer work at Sara's Sanctuary or any offsite location, program or event sponsored in part or wholly by Sara's Sanctuary.
- I understand that my volunteer status can be revoked at any time for my safety or the safety of the animals.
- I agree to respect the confidential nature of the program (client/donor information, operations, etc).
- I understand that I am not an employee of Sara's Sanctuary and am not eligible for any employment-type benefits including employment insurance, or worker's compensation.
- I understand the potential risks of working with animals and bringing home illnesses from Sanctuary animals to personal pets and will adhere strictly to the hygiene policies of Sara's Sanctuary.
- I understand that Sara's Sanctuary expects high standards of moral and ethical treatment of animals and will adhere to these standards in the capacity of a volunteer.
- I hereby authorize Sara's Sanctuary to seek emergency medical care on my behalf in the event of an accident, injury or illness.
- This is only a three hour shift. So we respectfully ask that all cell phones be left in the in-box which is very close and accessible to you, or you may also leave in your car. Cell phones are not safe around many of the animals, if you feel the need to check for urgent calls within this three hours, the in box is only a hands grab away from you.
- No photographs or video footage is allowed without prior approval - when approved digital equipment is permitted, electronic copies of the photos or video footage must be surrendered to Sara's Sanctuary prior to leaving the property (please bring a memory card reader)., once we have down loaded and approved the pictures, you can have fun sending copies to your friends. All copy rights belong to Sara's Sanctuary. Please remember this is not a public facility, we are not a petting zoo.
- I have accurately and truthfully completed this volunteer application and agree to all the above stated rules.

Signature: _____ Date: _____

Please submit your completed application by mail to:

Sara's Sanctuary
23515 NE. Novelty Hill Rd. B221
Redmond, WA 98053

When we receive your application, we will contact you for a follow-up and to answer any questions you may have. Thanks for your interest in our volunteer opportunities , we look forward to meeting you soon.

For Internal Use:

Notes:
