

Main Line Animal Rescue

Volunteer Application

Personal Data:

Name: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Postal Code: _____

Home Telephone: (____) _____ Work Telephone (____) _____

Cellular Telephone: (____) _____ Email: _____

Emergency Contact:

Name: _____ Relationship: _____

Home Telephone: (____) _____ Work Telephone: (____) _____

Cellular Telephone: (____) _____

How did you hear about MLAR?

Do you have any allergies or conditions that might affect your volunteer work?
If yes, please explain:

Have you had any formal training in pet care or animal welfare?

Please check which areas you would be willing to volunteer:

_____ Exercising/Socializing Animals

_____ Transportation to and from vet

_____ Foster Care

_____ Grooming/Bathing Animals

_____ Kennel Care

_____ Adoption Events

_____ Administrative Work

_____ Humane Education

_____ Other (please explain):

Availability?	Morning	Afternoon	Evening
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

Which do you prefer to work with: dogs or cats?

I, (print name) _____ certify that all information provided in this application is true and correct. I understand that any statements, representations or failure to disclose pertinent information will be considered sufficient cause for disqualification from consideration for volunteer service or immediate discharge.

I acknowledge my position at MLAR is entirely voluntary and without compensation. I also understand that nothing contained in this volunteer application or in the interview is to create an expressed or implied volunteer contract between MLAR and myself. No promises regarding volunteer work or any duration of service have been made to me and I understand that no such promise is binding unless issued by MLAR in writing. I further understand and agree that if I am offered and accept a volunteer position at MLAR, my volunteering can be terminated with or without cause, or with or without notice, at any time, at the discretion of MLAR.

I acknowledge and agree that my volunteer position is also contingent upon my signing the MLAR Volunteer Form and Waiver of Liability.

Signature:

Date:

Please send to:
Main Line Animal Rescue
PO Box 89, Chester Springs, PA 19425
fax to: 610.933.7900 or e-mail to volunteer@MLAR.org