



Volunteer Application Page 1 of 2

Name: _____ Date _____

Address: _____ City/Zip _____

Home ph#: _____ Cell ph#: _____ Work ph#: _____

E-mail: _____ Facebook: _____

Occupation: _____ Student y/n _____

How did you find out about us? _____

Are you a member of any animal welfare organizations? Y/n _____

Who and how do you participate? _____

Areas of Volunteer Interest – Please circle

Adoptions: Set up at 11AM-12PM, Break down 3:30pm-4:30pm

Special Projects: Passing out flyers, Community Events, Contacting local businesses

In case of emergency, whom should we notify?

Name: _____

Address: _____ City/zip _____

Home Ph#: _____ Work Ph#: _____ Cell ph#: _____

Your relationship to this person _____

If fostering you must complete our adoption application form.

Are your animals current on vaccinations, (kennel cough within 6 months): y/n ____

Will you be able to bring the animal to adoptions? yes/no

In signing this contract and accepting an animal from Animal Rescue Volunteers if you chose to be a volunteer and a foster home , you will be assuming responsibility for the care and welfare of that animal. Animal Rescue Volunteers will assume all veterinarian care associated with that animal until it is adopted.

If you can no longer care for the animal you are fostering, you are to call ARV, and we will make arrangements to pick up said animal. No animal belonging to ARV shall be turned over to any city/county animal shelter or turned over to any other person. In the event that ARV feels that any of these obligations are not being met, it has the right, without notice, to remove the animal from your residence.

In addition, by signing this contract you agree to render and hold harmless Animal Rescue Volunteers and any of its members or volunteers and waive from liability the above and their heirs for injuries, expenses or harm associated with fostering this animal.

NO ADOPTION SHALL BE DONE WITHOUT THE APPROVAL OF ANIMAL RESCUE VOLUNTEERS INC. UPON THE ADOPTION OF THE ANIMAL, ANY DONATION FEE WILL BE TURNED OVER TO ANIMAL RESCUE VOLUNTEERS, INC.

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Animal Rescue Volunteers, Inc. 1464 Madera Rd., #N350, Simi Valley, CA 93065

Phone (805) 579-8047

Visit www.arvsimi.org E-Mail staff@arvsimi.org

FED ID# 95-4520550



WAIVER OF LIABILITY

THIS RELEASE CONTAINS IMPORTANT LIMITATIONS OF LEGAL LIABILITY

PLEASE READ IT

The undersigned states as follows: I acknowledge that working in public with animals contains inherent risks of injury and damage to me personally, and to my equipment. Nevertheless, knowing these facts, I hereby for myself, my heirs, executors and administrators waive, release and discharge ANIMAL RESCUE VOLUNTEERS, INC. and all other persons and organization in any way connected with the ANIMAL RESCUE VOLUNTEERS, INC. its Board of Directors, officers and employees, their representatives, heirs, executors, administrators and assignees from any and all right, claim or liability for damages or for any and all injuries that might be sustained by me including injuries to and from animals or from any and all claims of any kind or nature that I might have as a result of, or arising out of my participation in this event. Further, I do hereby acknowledge that this release will extend to any accidents, damages or claims arising out of my involvement, caused by my own act or the acts of anyone or animal within my control. I further agree that I will defend, indemnify and hold harmless ANIMAL RESCUE VOLUNTEERS, INC. its officers, directors, members and agents or any of them against all claims, demands and causes of action including court costs and attorney's fees, directly or indirectly arising, from any action of the proceeding brought by or prosecuted for my benefit contrary to this release extended to all claims of every kind and nature whatsoever, whether known or unknown and expressly waive any benefits I may have under Section 1542 of the California Civil Code relating to the release of unknown claims.

I do acknowledge that I have read the forgoing paragraphs and know and understand the content thereof

SIGNATURE: _____ **DATE:** _____

PRINT NAME CLEARLY: _____

MINORS MUST HAVE THE FOLLOWING LIABILITY SIGNED BY THEIR PARENTS OR LEGAL GUARDIANS

We, the undersigned parents or guardians of _____, for and in consideration of our child's participation in Public Performance activities, state that we have read the waiver and release written above, and we expressly agree that the terms and conditions of said waiver and release shall apply to and be binding upon us and our minor child insofar as it pertains to his or her participation in the event and to any injury or damage said minor child.

I declare under the penalty of perjury that the foregoing is true and correct

Executed this _____ day of _____, 20____, at Simi Valley, California.

Guardian or Parent signature _____ relationship _____

Phone# _____ E-mail _____

