

## **Volunteer Application**

Thank you for your interest in volunteering with Jane's Journey Home for Dogs! All potential volunteers must submit a completed application. We look forward to helping you find a volunteer role that matches your skills, interests, and schedule; that benefits both you, our community, and most importantly, our furry companions. Volunteer opportunities are available for anyone ages 8+ (unless otherwise approved.) Minors under the age of 18 must be accompanied by a parent or approved adult. Volunteers ages 14 and up must attend Volunteer Orientation.

| Volunteer Information  |   |
|--|---|
| Last Name*   | First Name*   |
| Date of Birth*   |   |
| Email Address*   |   |
| Address*   |   |
|  |   |
| Phone Number*  |   |
| Emergency Contact*   | Phone Number*   |
| Will you be volunteering with anyone u   | nder the age of 18?   |
| No Yes   |   |
| If yes, are you their parent or approved   | I guardian for this activity?   |
| Yes  |   |
| No Parent/Guardian name and ph   | none number:  |
| Do you have any Conditions or allergie   | s that may affect your ability to perform certain tasks?                      |
| Yes No   |   |
| If "Yes" please explain:   |   |
| Have you ever been convicted of a mis  | sdemeanor or felony?  |
| Yes No   |   |
| If "Yes" please explain. (This does not  | necessarily disqualify you from volunteering.)                                |
| Volunteer Interests  |   |
| Why would you like to volunteer with Jawould like to contribute?                     | ane's Journey Home for Dogs? Are there any special skills you                 |
| Because it takes both staff time and tracommitment. Are you able to commit to Yes No | aining; volunteer positions require a minimum six-month o at least six month? |

## Please check the positions in which you may be interested.

| potty breaks. Start your day off with a ca   | ring gesture by taking our car   | need a little extra consideration and more frequent nine residents out for a quick potty break and a clean   |
|--|--|--|
| oom check on your way to work in the n   | norning. Early Risers arrive at  | the sanctuary typically around 6:00am.   |
|  | osition provides our animals v   | re by feeding animals and cleaning living areas. with clean surroundings and is essential to their ent with play and snuggle time.   |
| Resident Technician: Receive medication with routine exams, help give medication   |  | s stay happy, healthy, and live their best lives. Assist<br>therapy based on individual care plans.  |
| Dog Walker: Walk dogs around the giving space. Assist with "meet & greets"   |  | ng with them outside or snuggling with them in their ve adopters.  |
|  | most elderly animals cannot h  | with a much needed final potty break and overnight hold their bladders for extended hours. Nighttime   |
| Greeter/Office Assistant: Welcome vientry, filing, and assist with other office to   |  | hem to activities. Help answer phones, emails, data  |
|  |  | vell as functional! Assist with general building and alking trails, fences, etc. General fix-it skills are a   |
| Animal Transport: Transport animals required.)   | to and from appointments. (V   | alid WI driver's license and proof of insurance  |
|  |  | residents with a suitable animal to provide pet DEVELOPED AND IS NOT YET AVAILABLE   |
| Special Events: Spread the joy of selairs and adoption events.   | nior dogs and special needs p  | pets by manning a booth representing JJH at vendor   |
|  |  | e JJH event. Gather supplies, decorations, and e part of fundraising to help the animals.  |
| other parties, including for such purposes as crimin<br>whatsoever for supplying such information. I also<br>application for participation in JJH programs, I agre<br>and expenses of any nature whatsoever, including | nal background checks, and I release<br>understand I will not be paid for my s<br>he to release and hold harmless JJH<br>without limitation, attorney's fees and<br>andling animals and I accept these r | ntarily. I understand that this information may be disclosed to Jane's Journey Home for Dogs, LLC. (JJH) from any liability ervices as a volunteer. In consideration of JJH accepting my from and against any and all loss, damage, claims, liability, costs discontinuous d |
| Your Signature:  |  |  |
| *  |  | Data   |
|  |  | <u>Date</u>  |
|  | Office Use   |  |
| - · · · · · · · · · · · · · · · · · · ·  |  | Training Completed   |
| Initial  | Initial  | Initial  |