



VOLUNTEER APPLICATION

Name: _____ Birthdate: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Mobile Phone: _____ Other Phone _____

Emergency Contact: _____ Relationship: _____

Mobile Phone: _____ Other Phone: _____

Would you be able to assist in transporting animals for adoption events or rescue opportunities? Please circle one: YES NO

May we add you to a text messaging application for quicker notifications? YES NO

Please tell us what types of volunteer opportunities interest you the most:

In consideration of The Friends of Marshall Animals (FofMA) accepting my application for participation in volunteer programs, I agree to release and hold harmless FofMA from and against any and all loss, damage, claims, liability, costs, and expenses of any nature whatsoever, including without limitation attorneys fees and disbursements, arising from or occasioned by my participation in FofMA programs. I understand there are certain risks inherent in handling animals and I accept those risks. I understand if an accident or injury should occur, no matter how minor, that I will notify FofMA officer immediately and seek any medical attention utilizing my own medical insurance.

I agree that FofMA may photograph my participation in this program, and I hereby release any such photographs to FofMA for use in its programs, publications, and purposes.

Signed: _____ Dated: _____

Office Use Only:

_____ Added to Email Group

_____ Added to Facebook Group

_____ Added to Remind Me