

JCAPL Use: Volunteer Fundraiser Foster(cats/dogs) Adoption Center

Date Contacted: \_\_\_\_\_ By: \_\_\_\_\_



**animal protection league**

JOHNSTON COUNTY

**(JCAPL)**

**VOLUNTEER APPLICATION**

P.O. Box 607, Smithfield, North Carolina 27577

(919) 989-7601

Completed applications can be mailed, faxed or emailed:  
fax: 919-300-5524 | email: [help@jcapl.org](mailto:help@jcapl.org) | [www.jcapl.org](http://www.jcapl.org)

**THANK YOU** for your interest in volunteering with the Johnston County Animal Protection League ("JCAPL"). Volunteers play a vital role within our organization. Without your support, we would not be able to assist nearly the number of animals who need help in our community.

Please complete the Adult/Minor Volunteer Application below. Select the volunteer activities that most interest you. Please **print** your responses clearly.

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Please list any children, and their age, who would accompany you to the events below:

Name \_\_\_\_\_ Age: \_\_\_\_\_ Name \_\_\_\_\_ Age: \_\_\_\_\_

Name \_\_\_\_\_ Age: \_\_\_\_\_ Name \_\_\_\_\_ Age: \_\_\_\_\_

Do you have experience working with animals?  No  Yes If yes, please describe:

\_\_\_\_\_

Describe any present or previous volunteer work you have done:

\_\_\_\_\_

**Please check the volunteer opportunities you would like to participate in:**

<input type="checkbox"/> Community Outreach	<input type="checkbox"/> PetSmart Luv-A-Pet Center for Cats
<input type="checkbox"/> Adoption Events	<input type="checkbox"/> Humane Education
<input type="checkbox"/> Fundraising	<input type="checkbox"/> Fostering <input type="checkbox"/> Canine <input type="checkbox"/> Feline
<input type="checkbox"/> Public Events for Families and Their Pets	<input type="checkbox"/> Spay/Neuter Program

Do you have pets?  No  Yes  Dogs  Cats  Other \_\_\_\_\_

Please check the animals you are comfortable handling, working with or fostering:

Small/Med Dogs  Med/Large Dogs  Puppies  Cats  Kittens



Many times we need help transporting animals to and from events, veterinarian appointments, etc. Do you have a valid North Carolina Driver's license?  Yes  No

How did you hear about the volunteer opportunities with the Johnston Co. Animal Protection League?

Website  PetSmart  School  Facebook  Friend

**FOSTER APPLICANTS ONLY**

Will this be your first foster?  No  Yes

Do you prefer (Check all that apply):

Male  Female  Either  Baby  Young  Adult  Senior  Either

Do you Rent/Own. If Rent please provide landlord contact information \_\_\_\_\_

Is your yard fenced?  No  Yes If no, how will you address exercise a canine? \_\_\_\_\_

Are your pets current on vaccines/flea, heartworm preventatives and FIV/FelLeuk tested?

No  Yes Vet's name and contact information: \_\_\_\_\_

Are you able to transport your foster to vet appointments and adoption events?  No  Yes

Are you willing to administer medication or take dog to obedience training if needed  No  Yes

**The following waiver must be signed by all Volunteers and their legal guardian if the Volunteer is under age 18. Volunteers under 16 requires Guardian present. We reserve the right to deny any Volunteer that does not follow instructions.**

**RELEASE OF LIABILITY AND INDEMNITY AGREEMENT**

For and in consideration of a Volunteer being allowed to work with animals from JCAPL, I, the above-named Volunteer hereby fully and forever release, discharge, acquit and exonerate JCAPL, its volunteers, affiliates and all others acting on its behalf, as the context permits, from any and all claims, actions, causes of action, remedies and complaints of any kind which I have or may in the future have, whether known or unknown, arising out of or relating to the animals or my volunteer work for JCAPL, including specifically all claims for personal injury, paralysis, wrongful death, property damage and all claims resulting from any injury inflicted by the animals.

I recognize and accept all risks associated with unpredictable animal behavior on behalf of me or any minor of who I am Guardian. I specifically assume all risks arising out of or relating to the care and handling of the animals. I recognize that JCAPL and/or its agents, volunteers, or affiliates make no representations whatsoever as to the past history of the animals and whether or not they are safe animals.

I agree to defend, indemnify and hold harmless JCAPL from any and all claims and costs, including attorney fees, arising out of or relating to the animals.

**I have read the foregoing and voluntarily agree to the terms set out above and so indicate by signing and dating the appropriate place below.**

**I have received and agree to the Foster Guidelines and Agreement  Yes  N/A**

Volunteer signature: \_\_\_\_\_ Date: \_\_\_\_\_

Guardian signature: \_\_\_\_\_ (if applicable) Date: \_\_\_\_\_

JCAPL Representative: \_\_\_\_\_ Date: \_\_\_\_\_

