

Cat Crusaders

PO Box 46292 * Tampa, FL 33647 * tampacatcrusaders.org * 941-444-1228

Volunteer Application

Today's Date:		SUBMISSION INSTRUCTIONS Complete the following and submit one of two ways: 1. Save and email to volunteer@tampacatcrusaders.org 2. Fax to 888-257-4517		
PERSONAL INFORMATION				
Name:			Home Phone:	
Address:			Cell Phone:	
City:	, State:	_ ZIP: _	Email:	
County:	A	ge:		
	equire adult	supervisi	sion by a parent, guardian, or a parent approved-volunteer	
EMERGENCY CONTACT				
Name:			Home Phone:	
Address:			Cell Phone:	
City:	, State:	_ ZIP: _	Email:	
Relationship:		_		
A LITTLE BIT ABOUT YOU				
Have you worked or volunteer	red with anir	nals bef	fore?	
Why do you wish to volunteer	with us?			
Are you acquainted with any (Cat Crusader	volunte	eers?	
If so, who?				
Have you adopted a cat from	us previously	/?		
If so, who?				

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Have you released a cat to us previously?
If so, who?
Do you have animal allergies? Yes No Have you ever been accused of a felony? Yes No Please provide details—reason and year of conviction, state/country, etc.
OTHER ANIMALS IN THE HOME
Do you have pets living in your residence? If so, please circle all that apply and provide number of
animals:
Dogs Cats Birds Other (please specify):
Are all of your pets spayed/neutered? Yes No If "no", please explain why:
Are all of your pets current on their vaccines? Yes No If "no", please explain why:
AREAS OF INTEREST Animal Care/Kenneling Adoptions Fostering Website Social Media Clerical Fundraising Anything Other Special Skills please give details:
AVAILABILITY
Number of hours Weekly / Monthly (circle one)
Date range: From to
Number of volunteer hours needed (if applicable)
Days you are available (check all that apply)
Sunday
Monday
Tuesday
Wednesday
Thursday
Friday
Saturday

WAVIER OF LIABILITY

I agree to release, discharge, indemnify, and hold harmless Cat Crusaders Inc. for any and all damage to my personal property while performing my volunteer services with Cat Crusaders Inc. in a volunteer capacity. This may also include assisting in adopting of pets through Cat Crusaders Inc. at local PetSmart stores or offsite events sponsored in full or in part by Cat Crusaders Inc. I recognize that in handling animals with Cat Crusaders Inc. while performing my volunteer services, there exists a risk of injury, including personal, physical hardship. On behalf of myself, my heirs, my personal representatives and executors, I hereby release, discharge, indemnify and hold harmless Cat Crusaders Inc., its agents, servants, and employees of PetSmart from any and all claims, causes of action of demand, of any nature or cause connected with my Volunteer Agreement and Release. This might include costs and attorneys' fees and court costs incurred by Cat Crusaders Inc. and/or PetSmart in connection with my volunteer services based on damages or injuries which might be incurred or sustained, but are not limited to animal bites, scratches, accidents, injuries and personal property damage.

I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE TERMS AND CONDITIONS OF THE FOREGOING VOLUNTEER AGREEMENT AND RELEASE AND THAT I WILL COMPLY WITH SAME.

Signature:	
Print name:	
Driver's License No.	
Date:	
PARENT OR LEGAL GUARDIAN (if under 18 years o	f age)
As a parent or legal guardian of the above-mentioned vochild/ward to volunteer services with Cat Crusaders Inc. and Release. I have read this Volunteer Agreement and conditions. On behalf of my child/ward and myself, I agr Volunteer Agreement and Release. I further recognize the babysitting my child and I will not hold any volunteer happens to my child.	as described within this Volunteer Agreement Release and fully understand its terms and ee to all terms and conditions as set out in the nat no one from Cat Crusaders or PetSmart will
Signature:	
Print name:	
Driver's License No.	
Date:	