



Monroe County Friends of Animals
Be a Hero ... Save a Life ... Volunteer!
Volunteer Application

Please print clearly

Name _____ Are you over 18 years of age? _____
 Address _____ City _____ State _____ Zip _____
 Email _____
 Phones: Home/work _____ Cell _____ Do you Text? Y N
 Emergency Contact _____ Phone # _____

Check Areas of Interest:

Help at Shelter (dog walking, socializing animals. Cleaning, laundry)		Thrift store (Sales or warehouse)	
Shelter clerical		Fundraising Events	
Fostering: Dogs / Cats		Website/Social Media	
Adoption Events		Communications	
Animal transport		Computer Systems	
Spay/Neuter Voucher Program		Admin/clerical	
Capitol Campaign Committee		WWW Gala Campaign	
Golf Tournament Committee			

Tell us more about your interests and skills

Indemnity Agreement and Waiver

WHEREAS, *MCFA* uses volunteers in many capacities including, but not limited to, assisting at the *MCFA* Thrift Store and interacting with animals at the animal shelter or elsewhere

WHEREAS, the *Volunteer* agrees to perform their volunteer activities in a safe manner. *Volunteer* is aware of the risks, dangers, hazards associated with being a volunteer and warrants that she/he has no physical or health related problems that would preclude any activities with animals.

NOW THEREFORE, in consideration of the premises, *Volunteer* hereby agrees to indemnify *MCFA* and its Officers, Director, and other volunteers against any claim or loss incurred by the *Volunteer* or anyone claiming by or through the *Volunteer* while performing their duties as a volunteer. He/she waives any right to any claim against *MCFA* for injury, disease, or any other matter that might be associated with their services.

The volunteer certifies by signing below that they have read and fully understand this waiver and release form and have signed it voluntarily with full knowledge of its significance.

Name (please print) _____

Signature of Volunteer _____ Date _____

*** Return this form to the shelter front desk, the Thrift Store, mail to *MCFA*, P.O. Box 106, Vonore, TN 37885. Or email with Application to: info@MonroeCountyFriendsofAnimals.org *** You will be contacted in a few days.

This section for trainer use:

Trainer's Name, Signature & Date _____

Orientation Date (dd/mm/yy) _____ Agreed upon time & dates for volunteering _____