



**Volunteer Application
Shelter, Rescue, Rehabilitation**

Attn. Sharon Fox, Executive Director: 221 2nd Avenue North, Algona Washington 98001

Email goodfoxbirdiehaven@yahoo.com Phone (253) 333-0766

Date _____

Name _____
First MI Last Familiar name

Residence

Address _____
Phone _____ E-mail _____

Employer

Name _____
Your title _____
Address _____
Phone _____ E-mail _____
Type of business or organization _____
Primary service(s) and area/population served _____

Preferred method of contact () Work () Residence

Please list any other volunteer opportunities you have participated on.

Organization Role/Title Dates of Service

Education, Training, and Certificates

Emergency Contact(s)

Skills, Experience and Interests

- | | |
|--|---|
| <input type="checkbox"/> Cage Cleaning | <input type="checkbox"/> Special Events |
| <input type="checkbox"/> Foster Care | <input type="checkbox"/> Outreach, Advocacy |
| <input type="checkbox"/> Donations | <input type="checkbox"/> Training |
| <input type="checkbox"/> Toy Making | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Marketing | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Education/Instruction | <input type="checkbox"/> Other _____ |

Availability

Days: _____
Times: _____
Frequency: _____

Why you would like to volunteer with Good Fox Birdie Haven? What do you hope to gain from your experience at Good Fox Birdie Haven?

Please tell us about any experience you have working with animals.

Do you have pet companions at home? If so please tell us about them (species, age, quantity, etc..)

Have you ever surrendered an animal to Good Fox Birdie Haven or any other animal rescue organization? If yes, please explain.

Do you have any medical conditions, physical conditions, and/or restrictions or other that prevent you from working with or around animals of all ages, sizes, species, and energy levels? If yes, please explain.

References

Please tell us anything else you would like to share.

My signature below confirms that I understand and agree:

1. Good Fox Birdie Haven reserves the right to refuse or terminate volunteer services or involvement of any individual at any time and for any reason; at the sole discretion of the Executive Director(s), Volunteer Coordinator or any of his/her designees, and any Executive Board member.
2. I further attest that the information throughout this document is stated true, correct, and under good faith. Any material misrepresentation or omission may be justification for refusal or termination of volunteer services or involvement. I agree to keep Good Fox Birdie Haven informed of any background issues or conditions that may make me an unfit candidate to provide services or have involvement with the organization. This includes but is not limited to illegal drug use, theft, or animal cruelty.
3. With the below signature, I authorize Good Fox Birdie Haven and any of its agents to make a thorough investigation of my background, history of involvement with animals, prior employment or volunteer work, character references, or any investigatory practices deemed necessary in order to maintain the safety and wellbeing of the organization, animal residents, and other volunteers.
4. By signing below, I further authorize Good Fox Birdie Haven and any of its agents to obtain and request any and all information for the purpose of such investigation, and release from liability any person, government agency, previous employers, or volunteer group from giving or receiving such information.

5. I understand that the falsification of any responses given in our application or other derogatory information or undisclosed criminal conviction(s) discovered as a result of this investigation, may preclude you from providing services or have involvement with Good Fox Birdie Haven.

Signature

Date

Printed Name

Good Fox Birdie Haven Release

By signing at the end of this form, I agree to the following:

1. In consideration of being a volunteer of Good Fox Birdie Haven, I attest that I am over eighteen (18) years of age and further agree to the following;
2. I understand that there are different techniques and philosophies regarding the care and training of parrots and other captive companion animals/birds. I understand that Good Fox Birdie Haven has set guidelines and procedures. I agree to follow any and all Good Fox Birdie Haven guidelines, procedures, and techniques, without deviation. In the event I should disagree with any guideline, I agree to comply with said procedure and guideline, providing my personal safety is not compromised. I further agree to discuss the matter with the Executive Director(s) or his/her designees. I agree to refrain from written/oral criticisms or objections against the organization until the matter has been discussed and a resolution has been reached.
3. I understand that Good Fox Birdie Haven program animals are adopted out through an application process and that the adoption/placement process is established by the Executive Director(s). When two or more parties are interested in adopting an animal, the decision will be made by the Executive Director(s) and in the best interests of the animal and the Good Fox Birdie Haven program.
4. I agree not to interfere with an adoption of or the removal of an animal from a foster or adoptive home. If I learn of information that could impact care, health, safety, or location of an animal within the Good Fox Birdie Haven program, I agree to discreetly share that information with the Executive Director(s).
5. I understand that my first duty as a volunteer is the furtherance of the mission, procedures, guidelines, and efforts to care for and protect the welfare of the animals coming into or in the Good Fox Birdie Haven program. If I ever feel I cannot fulfill that obligation in my words or actions relative to a situation, animal, or person, I agree to voluntarily resign to avoid any conflict of interest or appearance of impropriety. I understand that my inability to follow such duty constitutes a conflict of interest.
6. I understand that I may not unilaterally accept any animal on behalf of Good Fox Birdie Haven without prior expressed consent and approval from the Executive Director(s).
7. Good Fox Birdie Haven will not take any responsibility, financial, custodial or otherwise for animals accepted in violation of this provision.

8. I agree to remain drug free while actively performing my volunteer duties.
9. I further understand that the Executive Director(s) and Executive Board has sole decision making authority on fundraising opportunities, the presentation of educational programs, to sign contracts on behalf of Good Fox Birdie Haven, or to speak or publish media on behalf of the organization. Volunteers presented with these opportunities who wish to represent the organization in any way, must contact the Executive Director(s) and retrieve expressed prior approval before commencement of activities.
10. I understand that the Executive Director(s) may terminate my services or participation if I violate any portion of this agreement or for any conduct contrary to the best interest of Good Fox Birdie Haven.
11. I agree to support the mission, goals, and efforts of the organization with a positive attitude. I agree to approach all volunteer responsibilities with professionalism and respect, to promote goodwill by handling contact with staff, volunteers, customers, and visitors in a spirit of courtesy and cooperation.
12. In the event I am dismissed or resign from services and participation, I agree to fully cooperate and promptly make arrangements to return/relinquish any and all animals, cages or caging equipment, supplies, or any other property of Good Fox Birdie Haven. I understand that failure to do so, may result in being charged for the property's replacement costs or a report to law enforcement of theft to be filed.
13. I understand and agree that my activities as a volunteer are strictly performed on an un-paid basis, without monetary compensation or other benefit; including but not limited to Worker's Compensation benefits.
14. I am aware that the nature of activities to be performed by me through my volunteer activities handling animals that there may be inherent danger; including but not limited to property damage, harm, injury, illness, disease or death. I agree that all volunteer activities are to be performed by me at my own risk and I assume all responsibility thereof. I agree to understand and educate myself as to the hazards and risks in handling animals. I further hold harmless the Good Fox Birdie Haven and all agents for any personal injury or damage, directly or indirectly incurred, while participating in any Good Fox Birdie Haven activity.

15. I authorize Good Fox Birdie Haven to use or reproduce my name, voice, any photographs, video, or likeness of me and animals I interact with for, but not limited to, public relations, marketing, and for profit activities, products, or events.

Signature

Date

Printed Name

Good Fox Birdie Haven Confidentiality Agreement

By signing below, I agree to the following;

I understand that as a Good Fox Birdie Haven volunteer I am be in connection with or learn of information regarding individuals or entities through the review of printed material, handwritten paperwork, electronic communication, or through personal contact. As a volunteer, confidential or proprietary information may be disclosed to me regarding the operations of Good Fox Birdie Haven or the clients/sponsors of the rescue. Such information may be deemed private, sensitive, or confidential. I understand that any such information is to be held in strict confidence and only shared with the Executive Director(s) or Executive Board. I understand that in the event I breach this agreement, I may be held personally liable for any damages that result, including but not limited to court recourse costs, loss of property, missed opportunity costs, or my volunteer services and participation with Good Fox Birdie Haven may be terminated.

Signature

Date

Printed Name