

EDSON ANIMAL RESCUE SOCIETY

www.edsonanimalrescue.com



780-712-6788

Volunteer Application

Date: _____

Name(s) of Applicant: _____ Age: _____

Please note all volunteers under the age of 18 require permission from their Parent/Guardian.

Volunteers age 12 & under require parental supervision at all times during any E.A.R.S. events.

Phone # (H) _____ (C) _____ (W) _____

Address: _____ Town/ City: _____

Postal Code: _____ Email _____

Section 1 (All volunteers)

Please check any of the areas below that you are interested in volunteering for:

- Fundraising _____
- Animal Transport _____
- Adoption Events _____
- Administrative _____
- Other _____

1. What is your reason for wanting to volunteer for E.A.R.S.? _____

1. Do you have any previous/current volunteer experience? If yes, please list the organization and your duties as a volunteer : _____

2. Do you have any special skills or abilities that would benefit E.A.R.S.? _____

3. How many hours per week/month/year would you be available to offer your time? _____

4. Are you volunteering in order to fulfill a community service agreement? _____
If yes, what is the requirement? _____



Section 2 (Fundraising only)

5. At this time, can you list any fundraising events that you would like to coordinate or suggest: _____

6. Which areas of fundraising interest you? (check all that apply):

- Fundraising Team Leader (coordinate fundraisers, suggest and implement ideas) _____
- Fundraiser (request donations, suggest ideas) _____
- Volunteer (help at events, fundraisers such as bottle drives, farmers market) _____

Section 3 (Transport only)

7. What type of animals are you able to transport? _____

8. What areas are you able to provide transport to and from? _____

9. Do you drive this route on a regular basis? _____

10. What type of vehicle would you be transporting the animal(s) in? _____

11. Are you able to provide your own crates (if needed) to transport the animal? _____

Please INITIAL the following:

____ I understand that animal transport is on a volunteer basis and I do not expect to be reimbursed for any costs (i.e. fuel) incurred during this trip.

____ I understand that the animals I agree to transport may or may not have seen a veterinary beforehand and may NOT be fully vaccinated.

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Section 4 (All volunteers)

____ I agree to conduct myself in a courteous and professional manner as a volunteer and as a representative of E.A.R.S.

____ I agree that my services are provided to E.A.R.S. on a volunteer basis without pay or compensation of any kind and all services are to be performed at my own risk.

Do you hereby allow E.A.R.S. to use any photographs taken of yourself at events for public relations purposes? _____

By signing below I hereby submit that the information provided is true, and any false information may result in losing the privilege to volunteer for E.A.R.S. I understand that E.A.R.S. has the right to deny my application and that this application must be completed in full and approved by the E.A.R.S. Board of Directors before I may start my volunteer position.

Signature of Volunteer **X** _____

Name(s) printed: _____

Date _____

If you are under the age of 18, we require the signature of your Parent/Guardian.

Signature of Parent/Guardian **X** _____

Name(s) printed: _____

Date _____

E.A.R.S. representative (printed): _____

E.A.R.S. representative (signature): _____