



ATTLEBORO ANIMAL SHELTER Volunteer Application

Please Print & Return to:

Friends of the Attleboro Animal Shelter

Pond Street N | PO Box 592

Attleboro, MA 02703

Phone: 508.761.5617

Fax: 508.276.0444

Email: AttleboroPets@hotmail.com



FRIENDS of ATTLEBORO
ANIMAL SHELTER

Name: _____ Age: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone (Home): _____ (Mobile): _____

Email address: _____

Animal related experience:

Special skills or training:

Why do you want to volunteer?

Have you ever received a rabies vaccination? _____ If so, date of last vaccination? _____

Volunteer duties include (circle all of interest):

Cat Care	Trapping	Intake Fostering	Feeding Cleaning	Medical Vetting	Socializing	Evaluating	Adoptions
Dog Care	Walking Exercising	Training Socializing	Helping with Evaluating	Help to Screen for Adoptions	Fostering		
Shelter & Office	Laundry	Maintenance	Answer Phones Call Backs	Maintain & File Records	Thank You Notes		
Advertising	Pet Photos & Bios	Petfinder.com FAAS web site	Adopt-A-Pet	Fundraising			

Volunteer hours at the animal shelter are:

Cats: Mon – Fri, 8 am or 6 pm shift | Sat, 10am – 3pm | Sun, 11 am or 5 pm shift

What days/times are you available to volunteer at the shelter? (Please list all that apply)

Dogs: Sunday, 11am - 1pm | Wednesday, 6pm - 8pm | Saturday, 10am - 3pm

What days/times are you available to volunteer at the shelter? (Please check all that apply)

Sun 11am-12pm	Sun 12pm-1pm	Wed 6pm-7pm	Wed 7pm-8pm	Sat 10am-11am	Sat 11am-12pm	Sat 12pm-1pm	Sat 1pm-2pm	Sat 2pm-3pm

Are you available to volunteer at other times or able to volunteer from home?

Your signature below signifies that you understand the attached document which explains the rules and regulations for the animal shelter and agree to comply with them. Failure to comply with them could be grounds for removal from the volunteer program.

Signature: _____ Date: _____

Parent signature (if under 18): _____

Witness: _____

*The **Friends of Attleboro Animal Shelter** (FAAS) is a tax-exempt, all volunteer organization dedicated to providing financial and volunteer support to the Attleboro Animal Shelter for the care and well-being of the hundreds of unwanted, stray and needy cats and dogs that annually pass through the shelter. On a daily basis, our volunteers provide these homeless cats and dogs with nourishment, medical treatment, affection, and most of all, help in finding a loving new home.*

For more information, visit www.faaspets.org, call us at 508.761.5617, or send an email to AttleboroPets@hotmail.com.

City of Attleboro

Liability Waiver and Letter of Understanding

Whereas, I the undersigned have expressed a desire to participate as a volunteer in specific activities at the Attleboro Animal Shelter, and I am in support of the program being carried on by the City of Attleboro at this facility, and

Whereas, I have been informed by the Health Agent that serious accidents may occur during the activities in which I chose to participate, and that I may sustain mortal or serious personal injuries and/or property damage as a consequence of my said participation; and

Whereas, the City of Attleboro is unwilling to permit my participation in such activities unless I agree to release the City from all liability, further, I agree to release the City of Attleboro from all liability whatsoever for any personal injury or property damage which may result from my said participation; and

Whereas, I agree to the city of Attleboro Policies and Procedures pertaining to Animal Shelter Activities as explained to me by the Health Agent, further, that I have received and fully understand said Policies and Procedures and will abide by them and, further I understand that the City of Attleboro may revise said Policies and Procedures at which time I will be notified.

Now therefore, I, in consideration of the premises and of the City granting me permission to volunteer at the Animal Shelter, I hereby state and agree as follows:

- 1) Knowing and fully understanding the risks involved in my participation in activities at the Attleboro Animal shelter, I agree to assume such risks and to remise, release and forever discharge the City of Attleboro, it's employees and agents, from any and all claims for damages for personal injury or death or property damage sustained by me and arising out of or relating to my participation as a volunteer in such activities, whether or not such injury or death or property damage were caused or contributed to by the negligence of the City, its employees and agent
- 2) I further covenant and agree not to sue the City or any of its employees or agents for any damages for personal injury or death or property damage sustained by me and arising out of or relating to me in participation in activities at the Attleboro Animal shelter.
- 3) I further understand and agree that this release and covenant not to sue shall be binding upon my heirs, executors and administrators.

In witness whereof I have signed of my own free will on this the _____ day of _____ in the year _____.

Applicant Signature

Witness Signature