

Long Island Shelter
2 Rider Place, Freeport, NY 11520
(516)378-4340

Bobbi & the Strays
Volunteer Application
(A Nonprofit Organization)

Adoption Center
The Shops at Atlas Mall
71-03 80th Street, Glendale, NY 11385
(718) 326-6070

Date: _____ Atlas _____ Freeport _____ Other _____ Assisted by _____

Print Name: _____

Parent Name (If under 18): _____

Home Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____ Age: _____

Emergency Contact Name: _____ Number: _____

Anyone under the age of 16 must be accompanied by a parent and can ONLY volunteer with cats. You must be at least 18 years of age to volunteer as a dog walker. It is MANDATORY that you take the CAT and/or DOG Volunteer Orientation before you are permitted in the shelter.

Please tell us why you want to volunteer with Bobbi and the Strays? _____

Do you have any former experience in pet or animal welfare? If yes, list where and what you did. _____

What are your volunteer interests?

Dog Walker

Interact with Cats

Off-Site Adoptions Events

Event Participation

Fundraiser Event Planning

Raffle Baskets

Transporter

Office Worker

Photocopies
(Must have access to a copy machine)

Book Nook (Youth Volunteer)

What days/times are you available? _____

How did you hear about our volunteer opportunities? _____

Have you ever been convicted of a crime? Yes / No Animal cruelty? Yes / No

If YES, please explain: _____

Have you ever been employed by or volunteered for Bobbi & the Strays before? Yes / No

If YES, when, where and in what capacity? _____

I certify that all information I have provided in order to apply for and secure volunteer work with Bobbi & the Strays is true, complete and correct. I understand that any information provided by me which is found to be false, incomplete or misrepresent in any respect, will be sufficient cause to cancel further consideration of this application or immediately discharge me from the service of Bobbi & the Strays, whenever it is discovered.

I expressly authorize, without reservation, Bobbi & the Strays, its representatives, employees, or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application. I hereby waive any and all rights and claims I may have regarding Bobbi & the Strays, its agent.

I agree to read and follow the rules and guidelines of the organization. I agree to not hold any director, employee, board member, or any individual personally or otherwise responsible in the event that I sustain personal, financial, emotional, or property loss/damage while serving the organization. I agree to follow the supervision of all persons involved in volunteer management. I understand that as a volunteer I am an important representative of Guardians of Rescue, Inc. and must do my best to represent BATS in a manner that is consistent with its articles, by-laws, guidelines, and philosophies. I understand the volunteer release and agree to adhere to its entirety.

Signature of Applicant: _____ Date: _____

Volunteer Release and Waiver of Liability

Disclaimer: Please read this document carefully, this is a legal document.

This Release and Waiver of Liability (the "Release") executed on _____ (date) by _____ ("Volunteer") releases Bobbi & the Strays ("Nonprofit") a Nonprofit corporation organized and existing under the laws of the State of New York and each of its directors, officers, employees, agents, and/or third parties. The Volunteer desires to provide volunteer services for nonprofit and engage in activities related to serving as a volunteer _____ [insert title of volunteer service such as "mentor", "companion", "volunteer driver", etc..]

Volunteer understands the scope of Volunteer's relationship with Nonprofit is limited to a volunteer position and that no compensation is expected in return for services provided by Volunteer; that nonprofit will not provide any benefits traditionally associated with employment to Volunteer; and that Volunteer is responsible for his/her own insurance coverage in the event of personal injury or illness as a result of Volunteer's services to Nonprofit.

1. **Waiver and Release:** I, the Volunteer, release and forever discharge and hold harmless Nonprofit and its successors and assigns from any and all liability, claims, and demand of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from the services I provide to Nonprofit. I understand and acknowledge this Release discharges Nonprofit from any liability or claim I may have against Nonprofit with respect to bodily injury, personal injury, illness, death, or property damage that may result from the services I provide to Nonprofit or occurring while I am providing volunteer services.
2. **Insurance:** Further I understand that Nonprofit does not assume any responsibility for or obligation to provide me with financial or other assistance, including but not limited to medical, health or disability benefits or insurance of any nature in the event of my injury, illness, death or damage to my property. I expressly waive any such claim for compensation or liability on the party of Nonprofit beyond what may be offered freely by Nonprofit in the event of such injury or medical expenses incurred by me.
3. **Medical Treatment:** I hereby Release and forever discharge Nonprofit from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during my tenure as a volunteer with Nonprofit.
4. **Assumption of Risk:** I understand that the services I provide to Nonprofit may include activities that may be hazardous to me including, but not limited to dog attacks, dog bites, dog jumping, dog scratches, cat attacks, cat bites, cat scratching involving other risky activities. As a Volunteer, I hereby expressly assume risk of injury or harm from these activities and Release Nonprofit from all liability for injury, illness death or property damage resulting from the services I provide as a Volunteer or occurring while I am providing Volunteer services.
5. **Photographic Release:** I grant and convey to Nonprofit all right, title and interest in any and all photographs, images, video, or audio recordings of me or my likeness or voice made by Nonprofit in connection with my providing Volunteer service to Nonprofit.
6. **Volunteer Manual:** I have read the Bobbi & the Strays Volunteer Manual in full and have signed the same. I agree to abide by all the rules and regulations outlined within.
7. **Other:** As a Volunteer, I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of New York and that this Release shall be governed by and interpreted in accordance with the law of the State of New York I agree that in the event that any clause or provision of this Release is deemed invalid, the enforceability of the remaining provisions of this Release shall not be affected.

By signing below, I express my understanding and intent to enter into this Release and Waiver of Liability willingly and voluntarily.

Signature

Date

Signature of Parent or Natural Guardian of Minor
(Under the Age of 18 Years of Age)