



## Volunteer Application and Waiver™

### PLEASE PRINT CLEARLY

Thank you for your interest in volunteering with Fort Bend Pets Alive! (FBPA!) Please complete the application in full. Incomplete or illegible applications will not be processed. When we receive your application, we will review it and contact you with further information if you qualify for this opportunity.

If under 16 please check.

**NOTE: All applicants must be at least 16 years of age. All minors must attend the orientation with a parent or legal guardian.**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Name of Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_ Emergency Contact Number: \_\_\_\_\_

How did you hear about Fort Bend Pets Alive?

\_\_\_\_\_

Why do you wish to become a volunteer with Fort Bend Pets Alive?

\_\_\_\_\_

How long/often do you plan to volunteer with Fort Bend Pets Alive? \_\_\_\_\_

Are your volunteer hours required for a class/community service credit? YES NO

If yes, please complete the following:

Number of hours required: \_\_\_\_\_ Required date of completion : \_\_\_\_\_

Name, address and phone number of school or organization requiring service hours:

\_\_\_\_\_

**NOTE:** Fort Bend Pets Alive! requires a minimum of 30 volunteers hours before signing off community service credit.

**EXPERIENCE**

List your previous experience (volunteer, paid, or educational) that would be helpful in working with animals and/or people.

Activity	Organization	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____

Occupation: \_\_\_\_\_ Current Employer: \_\_\_\_\_

Are you currently, or have you worked or volunteered at any shelter? YES NO

If yes, which shelter? \_\_\_\_\_ Please list dates of employment/volunteering: \_\_\_\_\_

Are you bilingual? YES NO

Indicate language(s): \_\_\_\_\_ Spoken? YES NO Written? YES NO  
: \_\_\_\_\_ Spoken? YES NO Written? YES NO

Do you have any family or friends who currently work or volunteer for FBPA! YES NO

If yes, provide his/her full name: \_\_\_\_\_

**Please use additional sheets, if necessary, to answer the following questions:**

What companion animals do you have or have you had in the past?

Are you a member of any animal welfare organization? If yes, please provide the name of the organization and describe your role in that agency.

Work at the Fort Bend Pets Alive! is not only animal-related but also involves constant contact with the general public. How do you feel about communicating with diverse groups of people?

Describe any past experience you have had with working with the public, either as a volunteer or in a paid position.

Fort Bend Pets Alive! operates as a non-profit, for purpose or under a "chain of command" organizational structure. How do you feel about taking directions from others and working collaboratively with other volunteers and staff?

While we try our best to help each animal in our care find a home, there are instances when an animal, due to space, medical, behavior or other reasons must be humanely euthanized. Although you will not be involved in the process, we would like to know how you feel about it.

---

What are your special skills, interests or hobbies? (i.e. Photoshop, Excel, graphic design, creating signs & banners, public relations, videographer, musician, etc.)

---

We are always looking for volunteers with public speaking and community relations experience. Are you interested in providing this type of professional support? If yes, please describe your past experience in these areas.

---

Do you give permission to use your photographs and/or quotes? YES NO

---

**AREA OF INTERESTS:**

Fostering                      Medical Fostering                      Transportation                      Adoption Event  
PASS                      Office Work @Shelter                      Networking for Animals                      Marketing  
Social Media                      Fundraising                      Education & Outreach                      Political Advocacy

**REFERENCES :**

Full Name:\_\_\_\_\_ Telephone:\_\_\_\_\_ Relationship:\_\_\_\_\_

Full Name:\_\_\_\_\_ Telephone:\_\_\_\_\_ Relationship:\_\_\_\_\_

Full Name:\_\_\_\_\_ Telephone:\_\_\_\_\_ Relationship:\_\_\_\_\_

Some tasks performed by volunteers include lifting, bending, or carrying cages or other heavy supplies as well as handling, grooming or moving large animals. Some volunteer positions require the ability to safely return animals to their appropriate cages/kennels and to read kennel cards. Volunteers must be alert at all times while working around unpredictable and dangerous animals. Is there anything that would prevent you from performing any of the aforementioned tasks YES NO

If yes, please explain:

---

Have you even been convicted of any crimes, including both felony and/or misdemeanor?  
(Do not include traffic violations) YES NO

---

**EXPECTATION FOR BEHAVIOR OF VOLUNTEERS AT FORT BEND COUNTY SHELTER & AT EVENTS**

Fort Bend County Shelter is open-admission animal control facilities. The city has invited FBPA! in to the shelter to help more animals leave alive. Animal Control is much different than animal welfare. It is critical to understand that the function of Animal Control is to protect the public first, and to help animals second. There may be actions that you witness that you do not agree with. It is critical that you do not intervene in any situation at either shelter. If you have a concern, please write it down and email it to [info@fortbendpetsalive.org](mailto:info@fortbendpetsalive.org) or any of the staff members so that he/she can address the concerns or issues with shelter supervisors, if appropriate. FBPA! is here to help animals leave the shelter alive, and we can't do that if we get at cross purposes with the shelter staff or animal control officers. First and foremost, we all must work together to accomplish great things. It is grounds for termination if any altercations occur between FBPA! volunteers and shelter staff/ volunteers or if any negative publicity is produced in person or through public or private social media that could tarnish the reputation of these shelters, its staff or volunteers. I understand that the good relationship between this shelter and FBPA! is critical to making Fort Bend a no kill community and that I cannot cause any kind of negative issue while I am at either shelter representing FBPA!

Please sign your name below as agreement. \*

\_\_\_\_\_  
(Signature/ Date)

**VOLUNTEER AGREEMENT** In consideration of this opportunity to volunteer for Fort Bend Pets Alive! (HPA!), I agree to the following terms and conditions:\*

[ ] I have been provided and will abide by the mission, rules, regulations, policies and programs of FBPA! while I am a volunteer.

[ ] I agree to be supervised by an FBPA! Manager or designee and will work as a team member with all volunteers.

[ ] I will treat all animals, other volunteers, and the general public with dignity and respect.

[ ] If I will be sheltering or providing foster care or boarding for any of the FBPA! animals in my home, I consent to an FBPA! representative visiting my home from time to time to observe the animals and their living quarters.

[ ] I have accurately and truthfully completed this Volunteer Application and Agreement.

[ ] I understand that all HPA! volunteers must be at least 16 years of age or accompanied by a parent or guardian at all times.

[ ] THEREFORE, ON BEHALF OF MYSELF, MY HEIRS AND PERSONAL REPRESENTATIVES, I HEREBY RELEASE, DISCHARGE AND INDEMNIFY AND HOLD HARMLESS FBPA! THEIR ASSIGNS, SUCCESSORS, AGENTS, STAFF, OFFICERS, BOARD OF DIRECTORS, EMPLOYEES, CONTRACTORS AND REPRESENTATIVES FROM ANY AND ALL CLAIMS, CAUSES OF ACTION OR DEMANDS OF ANY NATURE OR CAUSE WHATSOEVER, REGARDLESS OF WHETHER OR NOT CAUSED WHOLLY OR IN PART BY THE NEGLIGENCE OF FBPA!, INCLUDING COSTS AND LEGAL FEES ARISING OUT OF, OR RELATING TO, MY VOLUNTEERING WITH FBPA!, INCLUDING, BUT NOT LIMITED TO, ANIMAL BITES, DISEASE, ACCIDENTS, PROPERTY DAMAGE, OR INJURIES.

[ ] **I AGREE, ATTEST TO AND CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT FALSE, MISLEADING OR INCOMPLETE INFORMATION SHALL BE CAUSE FOR DISQUALIFICATION, OR REMOVAL FROM THE VOLUNTEER PROGRAM AT A LATER DATE.**

**Please sign your name below as agreement. \***

\_\_\_\_\_  
Signature/Date

\_\_\_\_\_  
Printed Name