



CROSSROADS K9 RESCUE

VOLUNTEER APPLICATION FORM

CROSSROADS K9 RESCUE · 839 OAK ROAD, KRONENWETTER, WI · CROSSROADSK9RESCUE.ORG · 501(c)(3) ORGANIZATION

Volunteer Name (first/last): _____

Home Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Work Phone: _____ Cell Phone: _____

Email Address: _____

Employer: _____ Job Title: _____

I am interested in the following volunteer opportunities with Crossroads K9 Rescue (select all that apply)

- Business Development Coordinator
- Staffing Coordinator
- Dog Walking/Exercise Volunteer
- Foster Volunteer
- Housekeeping Volunteer
- Event Coordinator
- Social Media Coordinator
- Donations Coordinator
- Wherever Needed
- Other: _____

Availability

Mornings | Times: _____ Afternoons | Times: _____ Evenings | Times: _____

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Comments: _____

Please list any special skills or experience that may benefit the rescue or any of our individual programs:

Why would you like to be involved with this organization? _____

I consent to a background check performed either by Crossroads K9 Rescue, Inc. or a third party agency selected by Crossroads K9 Rescue, Inc. I waive any right of privacy I may have in such information for the limited purpose of Crossroads K9 Rescue, Inc. considering it for determining my suitability as a volunteer. I understand any conviction related to animal cruelty, abuse of an elderly person, or assault of any kind on a minor child will immediately disqualify me from volunteer service with Crossroads K9 Rescue, Inc.

Volunteer Signature: _____ Printed Name: _____ Date: _____



VOLUNTEER WAIVER

Volunteer Name: _____
Home Address: _____ City: _____ State: _____ Zip: _____
Phone Number: _____ Work Phone: _____ Cell Phone: _____
Email Address: _____
Emergency Contact: _____ Phone _____

I, (PRINT NAME HERE) _____, have voluntarily applied to assist Crossroads K9 Rescue, Inc. and/or its affiliates with volunteer tasks needed for the operation of the rescue and its public events. By performing this volunteer work, I agree as follows and have initialed each item to indicate that agreement:

- _____ I am aware that this is a contract between myself and Crossroads K9 Rescue, Inc., and that it waives legal rights that I may have now or in the future and releases Crossroads K9 Rescue, Inc. and others from claims for damages.
- _____ I AM VOLUNTARILY PARTICIPATING IN THIS ACTIVITY WITH FULL KNOWLEDGE OF THE TASKS INVOLVED. I AGREE TO ACCEPT ANY AND ALL RISKS ASSOCIATED WITH MY PARTICIPATION, INCLUDING BUT NOT LIMITED TO INJURY AND ILLNESS.
- _____ I understand there are risks and dangers associated with working with abused, feral, and domesticated dogs, including but not limited to, bites, scratches, zoonotic diseases (diseases transmitted from animals to humans), and allergic reactions. I also understand there may be risks involved with exposure to certain chemical cleaning products while performing my volunteer duties. I fully understand and accept those risks and dangers.
- _____ I fully assume all the risks involved with my volunteer activities, and acknowledge that they are acceptable to me. I agree to use my best judgment in undertaking these activities. I also agree to follow the rules and safety instructions as given by Crossroads K9 Rescue, Inc.
- _____ I agree that I will not sue, prosecute, or in any way make a claim against Crossroads K9 Rescue, Inc. for injury to me or damage to my property resulting from the negligence or other acts, howsoever caused, by any employee, agent, volunteer or contractor of Crossroads K9 Rescue, Inc. or other people as a result of my volunteer duties.
- _____ I fully and forever release and discharge Crossroads K9 Rescue, Inc. from any and all actions, causes of action, claims, liabilities, or demands I have or may have in the future, whether known or unknown, for injury, illness, death or damage arising out of or related in any way to my volunteer duties.
- _____ I agree that Crossroads K9 Rescue, Inc. may use my name, and pictures, photographs, or video and/or sound recordings of me on television, on radio, on the Internet, in emails, and in stories, news articles, advertisements, or other written or digital materials. I agree that such uses may include education, advocacy, and fundraising. I consent to and authorize, in advance, such use and agree that Crossroads K9 Rescue, Inc. does not have to notify me of such use or provide me with other consideration for such use. I waive any rights of privacy and/or publicity I may have in connection with these uses.
- _____ I agree that the rights I am giving up and agreements I am making apply equally to me and to my heirs, successors, assigns, guardians and legal representatives. I agree that none of those individuals may make any claim or take any action that I could not make or take myself.
- _____ I consent to a background check performed either by Crossroads K9 Rescue, Inc. or a third party agency selected by Crossroads K9 Rescue, Inc. I waive any right of privacy I may have in such information for the limited purpose of Crossroads K9 Rescue, Inc. considering it for determining my suitability as a volunteer. I understand any conviction related to animal cruelty, abuse of an elderly person, or assault of any kind on a minor child will immediately disqualify me from volunteer service with Crossroads K9 Rescue, Inc.

Volunteer Signature: _____ Printed Name: _____ Date: _____

VOLUNTEERS UNDER THE AGE OF 18: I, _____ (Parent/Guardian) fully and completely release Crossroads K9 Rescue, Inc. its Directors, agents, volunteers, and all responsible for any loss or injury that may result from my child's volunteer work while volunteering on behalf of Crossroads K9 Rescue, Inc. or for any activity my child is involved with on the Crossroads K9 Rescue, Inc. property or off property. This release expressly includes a full and complete waiver of any and all claims against Crossroads K9 Rescue, Inc., its Directors, agents, volunteers, and third parties. Furthermore, I agree to all of the terms listed above on the on the Crossroads K9 Rescue, Inc. Volunteer Waiver Form.

Parent/Legal Guardian
Signature: _____ Printed Name: _____ Date: _____