

A.R.K. Volunteer Application Form

Thank you for your interest in volunteering at the A.R.K., Association to Rescue Kritters Wildlife Rehabilitation Center. Please fill out the following information carefully and completely. You must be at least 18 years old to volunteer, or be able to come with a legal guardian.

Please print clearly

Name- _____

Address _____

Home Phone _____ Cell phone _____

E-Mail Address _____

Emergency contact info _____

Birthday Date (optional) _____

Do you have any physical or medical limitations? _____

Do you have reliable transportation to the A.R.K.? _____

What distance, one way, do you drive to get here? _____

Why are you interested in volunteering at the A.R.K.? _____

Volunteer Application (page 2)

Shift Availability

The A.R.K. asks that you volunteer for at least 2 four-hour shifts per month..
Please circle the number of days/shifts you can volunteer for in a one week.

Sunday	8am-12pm	12pm-4pm	4pm-8p
Monday	8am-12pm	12pm-4pm	4pm-8pm
Tues.day	8am-12pm	12pm-4pm	4pm-8pm
Wednesday	8am-12pm	12pm-4pm	4pm-8pm
Thursday	8am-12pm	12pm-4pm	4pm-8pm
Friday	8am-12pm	12pm-4pm	4pm-8pm
Saturday	8am-12pm	12pm-4pm	4pm-8pm

I can be available to work this schedule every week every other week once a month

May we call you to fill in on a shift if we find ourselves short handed? Yes____ No____

If you are unable to work your shift, please call the A.R.K. at (989) 389-3305, or, Sherry Goff
volunteer coordinator at (989) 701-0576 (cell) or (989) 389-4814 (home),.

Volunteer Application (3)

Additional Questions:

I would like to..	Yes	No
Help with daily activities: dishes, laundry, cleaning	_____	_____
Work with the wildlife: feeding and cleaning cages	_____	_____
Serve on a committee to plan fundraisers	_____	_____
Be a member of the Birds of Prey program	_____	_____
Help with pick-up of injured or orphaned animals	_____	_____
Help with mainenance type projects	_____	_____
Work on habitat simulation	_____	_____
Be notified of upcoming conferences	_____	_____
Is there any species with whom you do NOT wish to work with	_____	
Do you have a "favorite " species	_____	

Death and Euthanasia

Please be aware that sometimes animals come in who are suffering and whose probability of survival is very low, or whose probability of survival in the wild after treatment is very low due to injuries that are likely to be permanent even after treatment. If an animal is determined by the Director to be either un-releasable or untreatable, then we must legally and ethically choose to humanely euthanize that animal.

Being a volunteer means knowing that not all animals will survive. You will never be asked to make the decision for euthanasia or to perform it. It is very important to realize that all of us are doing the best we can to save as many as we can, and the decision to euthanize is never an easy one. It is helpful sometimes to look upon euthanasia as a gift, perhaps the hardest gift of all to give, but sometimes the most responsible one we can give to an animal in our care

Please read **Injuries and Zoonoses section (in the A.R.K. manual) before signing waiver..**

Volunteer Application (4)

Waiver

I agree that I am 18 years or older and I have read the forgoing volunteer application, including the section on **Injuries and Zoonoses**, and by signing below, hereby release the A.R.K. Association to Rescue Kritters, its officials, directors, staff and volunteers from any and all liability in regard to any injury or illness I may sustain as a result of my work with the A.R.K. Association to Rescue Kritters.

Applicant's signature

Date

For office use only:

This applicant has been _____ Accepted _____ rejected by _____

Interviewer name:

This volunteer has decided to leave and gave a reason _____

This volunteer has decided to leave and did NOT give a reason _____

This volunteer has been asked to leave by appropriate A.R.K. personnel _____

Hold Harmless Waiver
A.R.K. Association to Rescue Kritters

Name of applicant: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

In consideration of your accepting my volunteer participation at A.R.K. Association to Rescue Kritters, I hereby for myself, my heirs, executors, administrators, and assigns, waive and release all claims for damages which I may have or which may hereafter accrue to me against A.R.K. Association to Rescue Kritters, sponsors, agents, representatives, or assigns for any and all damages which may be sustained and suffered by me in connection with my association with or participation at A.R.K. Association to Rescue Kritters.

I have been informed of and understand the risks associated with working with injured and orphaned wildlife. If an animal under my care inflicts an injury upon a human, I will report the incident to the Director, Ruth Fruehauf, immediately and will abide by all pertinent policies and regulations.

Signature: _____

Date: _____

Signature of Parent or Guardian (for person under 18 years of age:

Hold Harmless Waiver
A.R.K. Association to Rescue Kritters

Name of applicant: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

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