



RU4ME PET RESCUE, P.O. Box 6221, Lake Worth, FL 33466

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Under 18 (Age) \_\_\_\_\_ D.O.B. \_\_\_\_\_  
 Minimum Vol age is 16. If under 18, parent must co-sign to give permission.

**MINIMUM COMMITMENT FOR COMMUNITY SERVICE HOURS IS 6 WEEKS**

Address: \_\_\_\_\_, City \_\_\_\_\_

Phones: (H) \_\_\_\_\_ (Wk) \_\_\_\_\_ (C) \_\_\_\_\_

Email: \_\_\_\_\_

I am a \_\_\_ Student \_\_\_ Retired \_\_\_ Work: Employed by \_\_\_\_\_

Phone \_\_\_\_\_

How late at night may we call? \_\_\_\_\_

Person to contact in case of emergency:

Name: \_\_\_\_\_ Relationship \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate Phone \_\_\_\_\_

I would be interested in helping RU4ME do the following: Check any items below that apply and we will talk to you to make your best match).

\_\_\_\_\_ PETS<sup>SMART</sup> Cat Room Care (once per week in the AM or PM shifts available 7 days per week to clean, feed, and socialize the cats in catroom: shifts 2-4 hours)

\_\_\_\_\_ Foster Care: Cats, kittens, dogs, (includes bottle feeding kittens); fill out Foster Application

\_\_\_\_\_ Fundraising: handing out fliers, preparing mail-outs, large fundraisers, manning collection cannisters at adoptions, planning events i.e. parties in honor of pets or people.

\_\_\_\_\_ Laundry: Bedding, towels, etc.

Length of time commitment can you make to RU4ME? i.e. \_\_\_ as needed; \_\_\_ seasonal: \_\_\_\_\_; 3 months, 6 months, 1 year?

What hours are you available to volunteer?

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- Cat Room Care @ Petsmart: Indicate A.M. or P.M.
- 
- \_\_\_\_\_ Mon \_\_\_\_\_ Tues \_\_\_\_\_ Wed \_\_\_\_\_ Thurs \_\_\_\_\_ Fri \_\_\_\_\_ Sat \_\_\_\_\_ Sun
-

**Volunteer Agreement and Release:**

I, \_\_\_\_\_, am requesting a volunteer position within RU4ME Pet Rescue. I agree to follow the rules and guidelines of the organization. I also recognize, understand, accept, and assume the inherent risks associated with the care and handling of animals.

I agree to not hold any director, employee, board member, individual or affiliate, and all others acting on its behalf, including but not limited to PETS MART, otherwise responsible in the event that I sustain personal injury, financial, emotional, or property loss/damage while serving the organization.

I understand that as a volunteer I am an important representative of RU4ME Pet Rescue and I must do my best to represent RU4ME in a manner that is consistent with the mission and philosophies. I agree to follow the supervision of all persons involved in volunteer management.

It is further understood and agreed that this waiver, release, and assumption of risks is to be binding on my heirs and assigns.

I have read and understand this volunteer release and agree to adhere to its entirety.

I state that I have a current tetanus shot, or I will obtain one. If I choose not to obtain a shot, I do so at my own risk.

\_\_\_\_\_  
Signature

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Legal Guardian if under 18

Date \_\_\_\_\_

\_\_\_\_\_ (Print name of Parent/Guardian)

**Please attach copy of Florida Driver's License**

Email: [ru4mepetrescue@yahoo.com](mailto:ru4mepetrescue@yahoo.com)