

WASHINGTON FERRET RESCUE & SHELTER
VOLUNTEER APPLICATION

Thank you for your interest in volunteering at the Washington Ferret Rescue & Shelter. We are entirely run by volunteers and the donation of their time & services. Any assistance you may be able to provide will be greatly appreciated by our Shelter. The following application is to screen volunteers as to their knowledge and experience with handling ferrets. All information will be expressly used for this purpose, and will not be shared with anyone outside the Washington Ferret Rescue & Shelter. By completing this form, the Shelter gathers all pertinent information as to your experience level and what activities may interest you. Please take a moment and fill this out so we can learn more about you!

Name: _____ Date: _____

Address: _____

City: _____ St: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Best number to contact you: _____ Best time to call: _____

Email Address: _____

Occupation: _____

Are you volunteering for school or other required service? Yes No

Age: _____. If less than 18, please have a parent or guardian sign giving their permission for you to volunteer with us. Please bring your signed form with you when you visit the Shelter.

Signature: _____ . ***Parents should plan to stay and volunteer with their children if they are under the age of 16.***

Do you have pets now? Yes No

What type/how many? _____

Are they spayed or neutered? Yes No. Current on vaccines? Yes No

Do your pets live: Inside Outside Both. Specify: _____

Have you ever owned a ferret before? Yes No. If yes, do you still have him/her? Yes No

How many years of experience do you have with ferrets? _____

What kind of experience do you have with ferrets? (showing, breeding, etc.) _____

When would you like to volunteer? Please check all that apply.

Monday

A/M

Tuesday

P/M

Wednesday

Available at short notice?

Thursday

Virtual opportunities (email, writing, etc.)

Friday

Saturday

Sunday

What activities would you like to partake in? Please check all that apply.

General Saturday Activities, During Shelter Hours:

Cleaning Cages

Cleaning Ears

Scrubbing Litter Pans

Clipping Nails

Doing Ferret Laundry

Cleaning Other Areas of the Shelter

Filling Water Bottles

Readyng Cages to be Sold

Bathing Ferrets

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Weekday Activities:

- | | |
|--|--|
| <input type="checkbox"/> Bailing Ferrets from Local Shelters | <input type="checkbox"/> Making/Meeting Appointments (surrenders/adoptions) |
| <input type="checkbox"/> Transporting Ferrets | <input type="checkbox"/> Calling or emailing on ferrets in the paper or Craigslist |
| <input type="checkbox"/> Cleaning the shelter during the week independently (includes: scooping boxes, checking food/water, letting ferrets out to play) | <input type="checkbox"/> Force Feeding |
| <input type="checkbox"/> Checking Voicemail & Returning Calls Daily | <input type="checkbox"/> Scaling Teeth |
| <input type="checkbox"/> Checking Email & Answering Questions | <input type="checkbox"/> Administering oral medications |
| <input type="checkbox"/> Working with Biters | <input type="checkbox"/> Administering SQ or IM medications as prescribed |
| <input type="checkbox"/> Intaking New Ferrets (health check/evaluation of new surrenders) | <input type="checkbox"/> Adoption Advisor (screening applications, calling references) |
| <input type="checkbox"/> Fostering Healthy Animals | |
| <input type="checkbox"/> Fostering Ill Ferrets | |

Related Skills:

- Ferret Related Art
 - Photography
 - Writing (newsletter articles, press releases)
 - Computer (web design, data entry)
 - Public Relations
 - Other:
 - Organizational Skills (please list examples where you have undertaken any of the above): _____
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I, _____, hereby agree to abide by the following policies during the time I am volunteering with WFRS:

1. I understand it is my decision to volunteer for WFRS and will not hold WFRS liable for any damage, injury or harm caused directly or indirectly through my volunteer activities with WFRS.
2. I will remember that in all my dealings with the public as a volunteer, that I am representing WFRS, and that the public will consider my words and actions regarding Rescue representative of the attitude and position of WFRS as an organization. If I enter into activities of a political or controversial nature, I am doing so as an individual, separate from WFRS.
3. I understand that as an individual, I cannot enter into agreements for the organization; any such activity will be forwarded to the Board of Directors.
4. I accept full responsibility for expenses incurred by myself as a volunteer for WFRS. Although I may be reimbursed by WFRS, I must have prior approval from an officer of the Board of Directors, as well as the necessary documentation and receipts.
5. I will always remember that I represent a non-profit organization and cannot profit from any activity related to the organization.
6. I understand that WFRS cannot guarantee or be held responsible for the health, behavior or temperament of the ferrets I may handle. I am aware that ferrets may cause personal or property damage and agree to keep the ferrets in my care securely contained.

I understand and agree to all of the above. I also understand that this form must be received and approved before I may volunteer at WFRS.

Signature: _____ Date: _____