

# Foster Volunteer Application



Name (First & Last): \_\_\_\_\_

Today's Date: \_\_\_\_\_ Date of Volunteer Orientation (if applicable): \_\_\_\_\_

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

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Preferred method of contact (i.e. phone number, email, etc.): \_\_\_\_\_

## Fostering Interest/Experience

How did you find out about our volunteer program? \_\_\_\_\_

Are you currently fostering pets or have you ever provided this service in the past?  Yes  No

If yes, please explain (include organization's name): \_\_\_\_\_

\_\_\_\_\_

### Describe your experiences with the following:

Kittens/Cats: \_\_\_\_\_

\_\_\_\_\_

Puppies/Dogs: \_\_\_\_\_

\_\_\_\_\_

Exotics (snakes, lizards, birds, etc.): \_\_\_\_\_

\_\_\_\_\_

Rabbits/Small Pets: \_\_\_\_\_

\_\_\_\_\_

### Which animals are you interested in fostering?

- Adult Dog - Medical
- Adult Dog - Behavior (kennel stress)
- Nursing Dog with Puppies
- Puppies
- Adult Cat - Medical
- Adult Cat - Behavior (shelter break)
- Adult Cat - Behavior (elimination issues, stress, socialization)
- Nursing Queen with Kittens
- Unweaned Kittens
- Kittens
- Critters (rabbits, rats, guinea pigs, etc.)
- Other: \_\_\_\_\_

Please list all current pets in household, including type, breed, sex, altered (Y/N), age, how long have you owned?:

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Where will your foster animal(s) be kept when you ARE home? \_\_\_\_\_

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Where will your foster animal(s) be kept when you are NOT home? \_\_\_\_\_

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In a 24-hour day, how long will the animal(s) be left alone at any given time?

Less than 4 hours     4-8 hours     8-12 hours     More than 12 hours

If required, how will you isolate foster animals from your own animals?

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Are you able to transport your foster animal(s) to/from scheduled appointments such as foster re-checks, veterinary, etc.?

Yes     No

Are all members of your household agreeable to having a foster pet in your home?

I live in an:  Apartment     Condo     Trailer     Home (own/rent)     Other: \_\_\_\_\_

Have you considered the negative aspects of fostering (i.e. destruction of personal property, messes, frequent feedings, etc.)?

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Do you want to be contacted about euthanasia decisions on your foster animal(s)?

Yes     No

How will you cope if a foster animal is considered for euthanasia? \_\_\_\_\_

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**Please sign below that you understand your responsibilities as a Foster Volunteer and agree to the Placer SPCA Foster Care Program policies.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

# Volunteer Agreement



This agreement is intended to indicate the seriousness with which we treat our volunteers. The intent of the agreement is to assure you of both our deep appreciation for your services and to indicate our commitment to do the very best we can to make your volunteer experience here a productive and rewarding one.

## I. AGENCY Placer SPCA agrees:

1. To treat the volunteer respectfully for the completion of the agency mission.
2. To be receptive to any comments from the volunteer regarding ways in which we might mutually better accomplish our respective tasks.
3. To offer the volunteer careful placement with consideration for personal preference, temperament, life experiences, and educational background.
4. To provide adequate information, training, and assistance for the volunteer to be able to meet the responsibilities of their position.
5. To ensure diligent supervisory aid to the volunteer and to provide feedback on performance.
6. To strive to maintain a smooth working relationship with the volunteer.

## II. VOLUNTEER

1. I agree to abide by the policies and procedures presented to me at the Volunteer Orientation and Training Meetings, and subsequent information that I am presented with by the Volunteer Director.
2. I fully understand that the PSPCA handles large numbers of animals on a daily basis. The disposition of these animals is unknown to the PSPCA. I agreed to hold the PSPCA harmless for any injury(ies) which I or the junior volunteer under my supervision might sustain, including, but not limited to, injuries caused by animals during the course of my(our) volunteer duties with the PSPCA.
3. I understand that PSPCA records regarding previous or new owners are to be kept confidential.
4. I agree to fulfill my commitment of 4 hours per month to PSPCA, and not exceed 4 consecutive months of inactivity.
5. I agree to perform my volunteer duties in good spirit and to the best of my ability and to seek guidance when in doubt.
6. I agree to be prompt and reliable in attendance, to contact the Volunteer Director or program supervisor if unable to work as scheduled.
7. I agree to attend continuing training classes that will allow me to maintain an ongoing competence in the performance of my job. I will take ideas, constructive comments, suggestions and criticisms directly to the Volunteer Director.
8. I agree to respect the staff and other volunteers and strive to maintain a smooth working relationship. If communication problems develop between employees/other volunteers and me, I will report these to the Volunteer Director as soon as possible.
9. I agree to accept PSPCA's right to dismiss a volunteer.
10. I agree to work safely, adhering to PSPCA's training guidelines.
11. I understand that if I am injured while active as an unpaid member of the volunteer staff, that I am not covered by California State Worker's Compensation Law.
12. The PSPCA has my permission to use any and all photographs taken of me to promote PSPCA services and programs or to publicize any event. I understand that all prints and negatives become sole property of the PSPCA and may be used without payment or prior notification.

Adult Name (First & Last): \_\_\_\_\_

Signature (Adult Volunteer): \_\_\_\_\_ Date: \_\_\_\_\_

If applicable, Junior Name (First & Last): \_\_\_\_\_

# Volunteer Release Form



**ACCEPTANCE AND SIGNING THIS FORM IS A CONDITION OF VOLUNTEERING FOR THE PLACER SPCA AND LIMITS YOUR LEGAL RIGHTS. VOLUNTEER (AND PARENT OR GUARDIAN, IF APPLICABLE) MUST READ AND SIGN THIS FORM.**

My name is \_\_\_\_\_. I hereby agree to accept a position in a VOLUNTARY capacity as a VOLUNTEER for the Placer SPCA (hereafter referred to as PSPCA). I understand that the term VOLUNTEER means a person who freely serves the PSPCA in a voluntary capacity. I have read the entire contents of this PSPCA Volunteer Release Form and understand and agree that no liability whatsoever will be incurred by the PSPCA for anyone who performs voluntary actions or services.

In consideration of being allowed to volunteer in any capacity for the PSPCA, the undersigned:

1. Acknowledges and fully understands that the PSPCA handles large numbers of animals on a daily basis, and that the full temperament of these animals is unknown to the PSPCA. I have been advised and fully understand that there are certain risks associated with the duties I may perform for the PSPCA in my volunteer capacity including, but not limited to, injuries caused by animals.
2. Reasonably, knowingly and voluntarily agrees to assume all risks associated with any and all duties that I perform for the PSPCA in my volunteer capacity and to accept personal responsibility for the damages following such injury or loss.
3. Releases, waives, forever discharges and covenants not to sue the PSPCA, its administrators, directors, agents, servants and employees, all of which are hereinafter referred to as "releasees," from any and all liability to the undersigned, my heirs, assigns and next of kin for any and all claims, demands, losses or damages on account or injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasees or otherwise.
4. Knowing the risks associated with volunteering for the PSPCA, nevertheless hereby agrees to assume those risks and to release, discharge, indemnify, defend and hold harmless all of the releasees mentioned above who (through negligence, carelessness or otherwise) might be liable to me or my heirs or assigns, for damages.
5. Releases, waives, forever discharges and covenants not to sue the releasees for any and all loss or damage to my personal property while performing services for the PSPCA in my volunteer capacity.
6. Grants full permission to the PSPCA and/or its agents including its media partners to use any photographs, videotapes or any other record in which I may appear for any legitimate purpose.

**THE UNDERSIGNED HAS READ THE ABOVE WAIVER AND RELEASE, UNDERSTANDS THAT HE OR SHE HAS GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, SIGNED IT VOLUNTARILY, AND AGREES TO BE BOUND BY IT.**

Signature (Volunteer): \_\_\_\_\_ Date: \_\_\_\_\_

Signature (Volunteer Director): \_\_\_\_\_ Date: \_\_\_\_\_

**PARENT OR LEGAL GUARDIAN (OF VOLUNTEERS 17 AND YOUNGER)**

As a parent or legal guardian of the above-named Volunteer, I hereby give my consent to allow the undersigned volunteer to volunteer services for the PSPCA described within this Volunteer Release Form.

I have read the PSPCA VOLUNTEER RELEASE FORM and fully understand its terms and conditions. On behalf of myself and the above named Volunteer, I agree to be bound to all terms and conditions as set out in the PSPCA Volunteer Release Form. I understand that by signing this form I have given up substantial rights.

Signature (Parent/Legal Guardian): \_\_\_\_\_ Date: \_\_\_\_\_

Signature (Volunteer Director): \_\_\_\_\_ Date: \_\_\_\_\_