



Friends of Attleboro Animal Shelter

located on Pond St N
 PO Box 592, Attleboro, MA 02703
 508-761-5617 • 508-276-0444 Fax
 Email: attleboropets@hotmail.com
www.FAASpets.org

"Love Is Adoptable At the Attleboro Animal Shelter"

FAAS USE ONLY	
Date Recv'd:	_____
Training 1:	_____
Training 2:	_____
Training 3:	_____

Volunteer Application

Please complete, then fax, email or mail back to us

Please print clearly

Name: _____ Age _____

Address: _____

City: _____ State: _____ Zip: _____

Phone (Home): _____ (Cell): _____

Email address: _____ Best way to reach you?: _____

Why do you want to volunteer?

Do you have any animal-related experience? Please describe.

Have you ever received a rabies vaccination? ____ If so, date of last vaccination? _____

Areas of Volunteer Opportunities – circle all of interest

Cat Care	Trapping	Intake Evaluating	Feeding Cleaning	Drop Off/ Pick Up for Vet Appts.	Socializing	Fostering	Adoptions
Dog Care	Walking Exercising	Training/ Socializing	Helping with Evaluation	Screen Adoption Applications	Fostering		
Shelter & Office	Laundry	Adoption Follow-up Phone Calls	Return calls for information	Maintain & File Records	Create Adoption Packets		
Back Office	Update Petfinder with Photos / Bios	FAAS website technical support	FAAS website content developer	Event Planning/ Assistance	Fundraising	Staff Petsmart Tables (1 Sun/mo)	
FAAS Organization	Membership Coordination	Volunteer Coordination	Write & Send Donor Thank You Notes	Solicit Event Donations	Public Relations	Graphic Design	

Do you have any special skills or training *(does not have to be animal-related)?*

What days/times are you available to volunteer at the shelter? *(Check all that apply)*

Cats: Mon – Fri 8 am or 6 pm shift | Sat 10am – 3pm | Sun 11 am or 5 pm shift

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
8 am – 10 am							
6 pm – 8 pm							
Adoption Hours	1 pm - 3 pm			6 pm - 8 pm			

Dogs: Sunday 11 am – 1 pm | Wednesday 6 pm – 8 pm | Saturday 10 am – 3 pm

Sunday		Wednesday		Saturday				
11am-12pm	12pm-1pm	6pm-7pm	7pm-8pm	10am-11am	11am-12pm	12pm-1pm	1pm-2pm	2pm-3pm

Your signature below signifies that you understand the attached document which explains the rules and regulations for the animal shelter and agree to comply with them. Failure to comply with them could be grounds for removal from the volunteer program.

Signature: _____ **Date:** _____

Parent signature (if under 18): _____

Witness: _____

*The **Friends of the Attleboro Animal Shelter (FAAS)** is a tax-exempt, all volunteer organization dedicated to providing financial and volunteer support to the Attleboro Animal Shelter for the care and well-being of the hundreds of unwanted, stray and needy cats and dogs that annually pass through the shelter. On a daily basis, our volunteers provide these homeless cats and dogs with nourishment, medical treatment, affection, and most of all, help in finding a loving new home.*

For more information, visit www.faaspets.org, call us at 508.761.5617, or send us an email to AttleboroPets@hotmail.com.



City Of Attleboro, Massachusetts

ANIMAL CONTROL

77 Park Street

Attleboro, Massachusetts 02703

508-761-5617 • Fax 508-223-2208

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, INDEMNITY, AND PARENTAL CONSENT AGREEMENT ("AGREEMENT")

IN CONSIDERATION of being permitted to participate in any way in the Animal Control Shelter animal adoption program or related activities including but not limited to viewing, or coming into contact with an animal and/or adopting such animal ("Activity"), I for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACHKNOWLEDGE, agree, and represent, that I understand the nature of the Activities, and that the same will require contact with and exposure to animals, which despite being evaluated by trained personnel, are unpredictable and that while reasonable precautions have been taken by the Shelter, may be hazardous. I further acknowledge, warrant and agree that if, at any time, I believe conditions to be unsafe, I will immediately discontinue the activity in question and alert the Shelter.
2. FULLY UNDERSTAND that: (a) being in the presence of animals involves risk and danger of serious bodily injury, including permanent disability, paralysis, and death; (b) these risks and dangers may be caused by my own actions, or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, of the negligence of the Shelter; (c) there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of my participation or that of the minor in the activity.
3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the Shelter, its respective administrator, directors, agents, officers, members, volunteers, employees, other participants, sponsors, advertisers, and any owners, lessors of the premises on which the Activities take place from all liability, claims, demands, losses, or damages on my account caused in whole or in part by the negligence of the Shelter or otherwise, including negligent rescue operations, and I further agree this if, despite this release and waiver of liability, assumption of risk, and indemnity agreement I, or anyone on my behalf, makes a claim I will indemnify, save and hold harmless each of the parties claimed against from any litigation expenses, attorney fees, loss, liability, damage, or cost which anyone may incur as the result of such claim.

I have read this agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowable by law and agree that if any portion of the agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

Name of Participant: _____ Date: _____

Address: _____

Phone: _____ Participant's Signature: _____

MINOR RELEASE

AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF THE ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED AND CAPABLE OF PARTICIPATING IN SUCH ACTIVITIES. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE SHELTER OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS, AND I FURTHER AGREE THIS IF, DESPITE THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF, MAKES A CLAIM, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS EACH OF THE PARTIES CLAIMED AGAINST FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS, LIABILITY, DAMAGE, OR COST WHICH ANYONE MAY INCUR AS THE RESULT OF SUCH CLAIM.

Name of Parent/Guardian: _____ Date: _____

Address: _____

Phone: _____ Parent/Guardian: _____