



<i>For Office Use</i>	
Application Received:	_____
Orientation:	_____
One-on-One:	_____
Other Training	_____
Database:	<input type="checkbox"/> Paradigm <input type="checkbox"/> Access

## Adult Volunteer Application

**Mailing Address**  
**P.O. Box 412**  
**Newport, RI 02840**  
**401-846-8276**

**Street Address**  
**87 Oliphant Lane**  
**Middletown, RI 02842**  
**joyceb@potterleague.org**

Name \_\_\_\_\_  
*Last*
*First*
*Middle*
*Nickname*

Address \_\_\_\_\_  
*Street*
*City / Town*
*State*
*Zip*

E-mail Address \_\_\_\_\_

Home ☎ \_\_\_\_\_ Work ☎ \_\_\_\_\_ Cell ☎ \_\_\_\_\_

Emergency Contact: Name \_\_\_\_\_ Relationship \_\_\_\_\_  
 Their Phone Number ☎ \_\_\_\_\_

Your Current Occupation: \_\_\_\_\_

Employer & Address: \_\_\_\_\_

Education: (Circle last year completed)

High School 1 2 3 4    College / Graduate 1 2 3 4 5 6 7 8    Major: \_\_\_\_\_

Currently in School \_\_\_\_\_ Name of School \_\_\_\_\_

If you or a member of your family is serving on active military duty, or you know you will be moving within the next 6 months, will you next be transferred? \_\_\_\_\_ (month/year)

How did you hear about the Potter League's volunteer program? \_\_\_\_\_

Do you already receive mail from the Potter League?    Yes    No

Why are you interested in becoming a Potter League volunteer? \_\_\_\_\_  
 \_\_\_\_\_

Do you have any physical or psychological limitations or disabilities that might hinder you from participation in some activities (such as heart condition, back injury, allergies, etc.)? Yes No

If yes, please explain: \_\_\_\_\_

Please describe your availability for volunteering (weekends, weekdays, times, varies?)

\_\_\_\_\_

Do you have any of the following skills that we often need:

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> Graphic Artist | <input type="checkbox"/> Woodworking      | <input type="checkbox"/> Decorating             | <input type="checkbox"/> Event Planning |
| <input type="checkbox"/> Photography    | <input type="checkbox"/> Cooking/Catering | <input type="checkbox"/> Grant Writing          | <input type="checkbox"/> Landscaping    |
| <input type="checkbox"/> Sewing         | <input type="checkbox"/> First Aid/CPR    | <input type="checkbox"/> Dog Obedience Training |   |

Describe, briefly, your history of pet ownership or any previous experience working with animals: \_\_\_\_\_

Describe any present and previous volunteer work:

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Other special skills, training, interests, and hobbies that might be helpful to the Potter League:

What are your expectations of your volunteer experience at the Potter League? \_\_\_\_\_

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We would be interested in any further information you might wish to give: \_\_\_\_\_

Please list two references who are not family members:

<i>Name</i>	<i>Relationship</i>	<i>Phone Number</i>
_____	_____	_____
_____	_____	_____

*I give my permission to the Potter League for Animals to verify any of this information.*

\_\_\_\_\_  
( Signature )

\*Please be sure to complete and sign the back of this form.

# Volunteer Opportunities

( Please check the activities that most interest you )

- Dog Walker       Socializing Cats       Bathing & Grooming Animals  
 Dog Obedience Classes (Work under a trainers guidance to make our shelter dogs more adoptable).

Foster Parent:       Dogs       Cats (Short term care for an animal with special needs or for kittens / puppies until they are old enough to be made available for adoption.)

- Animal Assisted Activities Program Taking animals to visit people in hospitals and nursing homes. Shelter animals are often available.

If you would like to take your own animal on visits, we would have the animal evaluated for this program.

Please check  if you would like your animal evaluated. Type of animal: \_\_\_\_\_ and the animal's name: \_\_\_\_\_ Prior Training \_\_\_\_\_

- Transporter: Drop off and pickup animals at veterinary hospitals for spay-neuter surgery.  
(Must be available between 7:30 & 8:30 AM and / or 3:00 & 4:00 PM)

Do you have a valid driver's license?    Yes  No     State: \_\_\_\_\_    Number \_\_\_\_\_

## Shelter Upkeep and Maintenance:

- Cleaning cages (early mornings)       Minor repairs and carpentry  
 Painting       Gardening       Lawn and shrub care

- Clerical and Secretarial Support:

- Phone receptionist (answering/routing calls)  
 Data Entry  
 Lost and found pet service  
 Follow-up phone calls to adopters  
 Prepare Bulk Mailings  
 Computer activity - please let us know what programs you are skilled at (Word, Access, Publisher, Excell, Adobe InDesign, Dreamweaver, Cameleon?)

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- Greeter (Greeting the public, answering questions, giving directions to adoption areas)

- Adoptions counselor (Must have good computer and customer service skills. Additional training and time commitment required.)

## Education

- Teaching 8 lesson program to 3<sup>rd</sup> graders (Prefer teaching background)  
 Teaching 5 lesson program to 7<sup>th</sup> graders (Prefer teaching background)  
 Story hours / Pre-school presentations  
 Shelter tours  
 Reading with children (You must have a dog to be involved in this program)

Please check  if you would like your animal evaluated (dogs must pass Canine Good Citizen/Therapy Dog International Test). Breed: \_\_\_\_\_ and the animal's name: \_\_\_\_\_

- Community Outreach (presenters at fairs, community events, college or school events, and special educational/fundraising activities).       Bring a Potter League animal to an event

- Fundraising (Provide assistance to the shelter staff at special events or with fundraising)

- Donation Canister Program (Drop off and pickup coin canisters at various businesses / stores)

- Post flyers of animals and for special events

**Potter League for Animals**  
***Volunteer Release Form***

I, \_\_\_\_\_, hereby agree to accept a position as a volunteer worker for The Robert Potter League for Animals, Inc. (hereinafter referred to as “The Potter League”), and in so doing, I agree to comply with all of the policies, rules and regulations which may be established from time to time by The Potter League. I understand that failure to do so may result in my immediate termination as a volunteer.

I acknowledge that my services are provided strictly on a volunteer basis, without any pay or compensation of any kind, and without any liability of any nature on behalf of The Potter League, all services to be performed by me at my own risk.

I recognize that in handling animals and performing other volunteer tasks, there exists a risk of injury including physical harm caused by the animals and zoonotic diseases transmitted by animals. On behalf of myself, my heirs, personal representatives and executors, I hereby release, discharge, indemnify and hold harmless The Potter League, its agents, servants and employees from any and all claims, causes of action, or demands, of any nature or cause, including costs and attorney’s fees incurred by The Potter League in connection with the same, based on damages or injuries which may be incurred, or sustained by me in any way connected with my services for The Potter League, including, but not limited to, animal bites, accidents or injuries.

_____ Date	_____ Signature of Volunteer (Parent/Guardian, if for minor child)
	_____ Witness

I, \_\_\_\_\_, understand that public relations is an important part of volunteering at The Potter League. On behalf of myself, my heirs, personal representatives and executors, allow The Potter League to use any photographs, films, videotapes or other visual representations taken of me in volunteer service for use in public relations efforts.

_____ Date	_____ Signature of Volunteer (Parent/Guardian, if for minor child)
	_____ Witness