# Sunny Saints LogoVolunteer Application

Thank you for your interest in volunteering with Sunny Saints Rescue. As a completely volunteer run organization we want to use our volunteers affectively while enabling each volunteer to enjoy what they do in helping the organization and especially the Saints. We ask that each one complete this information form and return it by email to our Volunteer Coordinator. In order to stay in compliance with our non-profit status, we also require each volunteer to keep track of their volunteer hours and send the information to the volunteer coordinator at the end of each month.

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| Contact Information | |
|  | |
| Name: | Click here to enter text. |
| Street Address: | Click here to enter text. |
| City ST ZIP Code: | Click here to enter text. |
| Home Phone: | Click here to enter text. |
| Work Phone: | Click here to enter text. |
| Mobile Phone: | Click here to enter text. |
| E-Mail Address: | Click here to enter text. |
| Other Animals at Home: | Click here to enter text. |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Availability | | | | | | | |
| During which hours are you available for volunteer assignments? | | | | | | | |
|  | | | | | | | | |
|  | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
| Morning | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Afternoon | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Evening | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Comments: Click here to enter text. | | | | | | | |

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| Please describe your experience with dogs: |
|  |
| Click here to enter text. |

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| Interests |
| Tell us in which areas you are interested in volunteering: |
|  |
| ☐Fostering |
| ☐Dog Sitting (short term, vacation coverage for foster homes) |
| ☐Sick Dog Fostering (short term, best for a home without other animals) |
| ☐Fundraising (assist with ideas and implication with a fundraising committee) |
| ☐Fundraising (assist at events) |
| ☐Shelter Assessments (training will be provided) |
| ☐Transportation (from kennel or pickup site, to foster homes, to vet, to grooming, etc) |
| ☐Home Checks (pre-foster, pre-adoption... training will be provided) |
| ☐Grooming |
| ☐Photography |
| ☐Donation Collector (pickup and store donations (food, beds, leashes, collars, blankets, etc) and distribute as needed to foster homes) |
| ☐Training |
| ☐Other (please tell us your specialty and how you would like to help) Click here to enter text. |

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| Agreement and Signature | |
| By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. | |
|  | |
| Name (printed) | Click here to enter text. |
| Signature | Click here to enter text. |
| Date | Click here to enter a date. |