Sebring Angels Volunteer Application

Please complete this application form if you are interested in becoming an Sebring Angels volunteer.
Once you complete the form email it to SebringAngels@gmail.com

Contact Information

First name:_____ Last name: _____
Address: _____ _____
City:_____ State:_____ Zip:_____
Home phone:_____ Work phone _____ Cell phone:_____
Date of birth:_____ Gender:_____
Email: _____

Availability:

Please indicate the days and times you are usually available to volunteer, you may change this information later.

	M	T	W	Th	F	S	S
Start Time:							
End Time:							

What is the approximate distance from event location you would be willing to travel?_____

In the event of an emergency whom should we notify?

First name:_____ Last name: _____
Address: _____
City:_____ State:_____ Zip:_____ ____
Home phone:_____ Work phone _____ Cell phone:_____
Relationship: _____

Interests:

Please indicate your interest in the following areas.

□ Dog Supervision
□ Animal Transportation
□ Photography
□ Grooming
□ Other: _____

I Agree

I understand and agree submitting this application form does not automatically register me as a Sebring Angels volunteer and there may be certain qualifications I must meet. I agree to comply with the rules and regulations established by Sebring Angels. I recognize in handling animals and performing other volunteer tasks there exists a risk of injury, including physical harm, caused by the animals. On behalf of myself, personal representatives and executors, I hereby release discharge, indemnify, and hold harmless Sebring Angels from any and all claims, causes of action, or demands of any nature or cause. This includes costs and attorney's fees incurred by Sebring Angels 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 Sebring Angles, including but not limited to animal bites, accidents, or injuries. I hereby also consent to and authorize the use and reproduction by Sebring Angels or anyone authorized by Sebring Angels of any and all photographs taken of me while volunteering for any purpose, without compensation. Sebring Angels reserves the right to use these photos in any of its print or electronic publications.

I attest the information I have provided is true and accurate.

_____ _____
Name Date