Volunteer Application Unconditional Love Foundation

Please complete this application so that we can discover more about you, your interests, your skills, and your intentions in volunteering with us.

Name:											
Street Address:						City: _			State:	Zip:	
Home Phone:					E-mai	E-mail:					
Work Phone:					Fax: _	_ Fax:					
Cell Phone:					Other	Other:					
Emergency Contact Name:								_ Phone	::		
How did you	ı hear abo	ut us?									
Why do you	want to ve	olunteer v	vith ULF	?							
Have you ev	er volunte	ered for a	nother a	nimal rela	ited organ	ization	? Yes _	No	If yes, which one a	& in what capacity?	
•						ment?					
How many h	-		-								
Please list th	e times the	-				1	1	T	7		
		Mon	Tue	Wed	Thur	Fri	Sat	Sun			
	A.M.										
	P.M.										
			1						J		
Do you have	previous	experienc	e workir	ng with an	imals? Yo	es	No	Plea	se explain		
Have you ev	er adopted	l a pet? Y	es N	No							
Have you ev	er given a	pet up? Y	'es	No	Please ex	plain _					
What skills,	training, o	or knowled	lge do yo	ou have th	nat will as	sist in v	olunte	ering? _			

Please check the kind of volunteer work you v	would be willing to do to benefit ULF:								
Socialization	Dog Walker Home Visits								
Adoption Events	Special Events Fundraising								
Humane Education	Grant writing Newsletter								
Writing Articles	Internet Research Clerical/Data Entry								
Marketing/Publicity/Advertising	Get donations of collars, leads, food, etc								
Find Sponsors	Recruiting New Volunteers Transportation								
Fostering a dog in your home									
Other interests:									
Transportation:									
How far are you able to transport?	How far are you able to transport?								
Do you have a crate or do you need ULF to provide one?									
Do you have other pets in your home?									
Are they Spayed/Neutered? YesNo	If no, why not?								
Are they current on vaccinations? Yes	No								
Do they get along with other dogs? Yes	No								
Is anyone in your household allergic to animals? YesNo									
Can you separate the rescues from your own animals? Yes No Please explain									
Do you have a fenced in yard? Yes	No								
Do you have experience introducing unfamilia	ar dogs to each other? Yes No								
Are you familiar with positive obedience train	ning techniques? YesNo								
How long are you willing to foster? Emergen	cy Overnight Short term								
Until Adopted Other									
V	Volunteer Waiver (All Must Sign)								
abide by the policies and procedures as explai consent to provide my name, voice, photograp advertising, programming or promotional activ	e as a member of the volunteer team at the discretion of ULF, Inc. and to ned to me by ULF during any volunteer training and activity. I give my oh, film and likeness of myself or any pet in my care to the media for vities for the ULF, Inc. If asked to take a photo for ULF I understand ULF and I understand that I will receive no compensation for giving this								
Name:	Today's Date:								
Parent	tal Permission (If under 18 years of age)								
This form is required for any person under the	e age of 18 in order to be considered as a volunteer with ULF.								
I,, agree to PRINT NAME OF PARENT OR GUARDIAN	o all								
	gram, I have read and understood all the volunteer information provided. I								
Signature of Parent or Guardian	 Date								