

VOLUNTEER APPLICATION

Personal Information

Please Print clearly

Last Name	First	First Name		
Street Address				
City	State	Zip	County	
Home Phone		Cell Phone		
Email Address				
• •	electronic or mail corresp calls at \Box home \Box ce		🗌 mail	
Have you ever been conv	victed of a crime? If so, pl	ease provide a brief exp	planation:	

Please list the contact information for two personal references:

Name

email address

phone number

Availability

Please enter the day(s) and time(s) you are generally available for assignment

Select the type of activities you wish to participate in

- Become a Foster home (short or long term, emergency)
- _____ Transporting dogs to/from events
- Helping at Adoption Showcases &/or Outreach events
- _____ Walking dogs/Assisting with basic training
- _____ Bathing/Grooming
- General onsite assistance (poop patrol, basic repairs on equipment/facilities, etc.)
- _____ Fundraising
- _____ Technical (computer) assistance
- _____ Checking adoption/foster applicant references (phone calls)
- _____ Creating materials for distribution (event flyers)
- _____ Helping us get the word out!
- _____ Helping with education outreach
- Other _____

Skills and Knowledge

Please tell us a little about you, and list any specific skills, training or experience you feel will help you as a volunteer for the Buster Foundation.

I certify that the statements made in this volunteer application are true and correct, and have been given voluntarily. I authorize the Buster Foundation Pit Bull Education and Rescue to verify, in whole or in part, any information provided on this application. I understand that this information may be disclosed to any party with legal and proper interest, and I release The Buster Foundation from any liability whatsoever for supplying such information.

I recognize my right, as a volunteer, to discontinue my service at any time and for any reason. I also understand that The Buster Foundation reserves the right to discontinue my volunteer service relationship. As a volunteer, I understand and agree that I shall not, nor shall I expect to, receive any form of payment - including cash (wages), food, clothing, shelter or other kinds of payment for volunteer talents and services I contribute to The Buster Foundation except in cases where such payment has been pre-approved by a majority of The Buster Foundation's Board of Directors.

Signature of Volunteer Applicant:

Date ___/__/___

Signature of Parent or Guardian (if under 18 years old):

Date ___/__/___

Thank you for your interest in The Buster Foundation. A representative will contact you shortly to help find a volunteer placement that meets your special skills.