

GREAT DANE RESCUE ALLIANCE, INC. Volunteer Application

**Please Return to: Brittany Dail
3759 Countryaire Drive
Ayden, NC 28513**



Today's Date _____

1. Name _____
2. Email Address _____
3. Address _____
4. Phone # _____ Cell Phone # _____ Fax # _____
5. Why do you want to help Great Dane Rescue Alliance, Inc? _____

6. How are you able to help Great Dane Rescue Alliance, Inc?

- | | | | |
|---------------------------------------|--|--|---|
| <input type="checkbox"/> Foster Home* | <input type="checkbox"/> Home Visits | <input type="checkbox"/> Making Phone Calls | <input type="checkbox"/> Soliciting Donations |
| <input type="checkbox"/> Transports | <input type="checkbox"/> Arts & Crafts | <input type="checkbox"/> Computer Work | <input type="checkbox"/> Publicity/Marketing |
| <input type="checkbox"/> Graphics | <input type="checkbox"/> Sewing | <input type="checkbox"/> Events, Meet & Greets | |
| <input type="checkbox"/> Other _____ | | | |

*Please be sure to complete Foster section.

Do you currently own any pets? Yes No

a) If Your Pets Are Not Spayed/Neutered, Why not? _____

Type/Breed/Name	Gender	Age	Spay/neutered	How long

7. What is your occupation? _____

a) Name and address of employer _____

Telephone # _____ Work hours: _____

b) How long with this employer? _____

c) If less than 1 year, where were you previously employed? _____

8. Are any other members of your family employed? Yes No If so, please give
company name, address, phone number, and work hours: _____

9. Do you currently run a business out of your home? _____ If so what? _____

10. Have you or anyone in your immediate family ever been convicted of a charge of, or related to cruelty
to animals? Yes No

a) Is Any Such Charge Currently Pending? Yes No

11. Please provide the following references:

a) Veterinarian name: _____

Address: _____

Phone #: _____

Date and reason of last visit: _____

b) Name, address, phone number of a local individual (NOT a relative) who knows/has known
your pets. Please also add the best time to reach your reference: _____

12. What is your availability for transports?

13. How far or long are you willing to drive one-way? _____

14. Do you have a method of restraining dogs in your car? Yes No

Please explain: _____

If Volunteering for Home Visits

15. Are you comfortable visiting people you have never met for the purpose of approving them to adopt? Yes No
16. Do you have a Dane you can bring along with you? Yes No
17. Are you able to politely but firmly point out things to a homeowner that may injure a Dane in the house/yard? Yes No
18. Can you suggest things that will make an adoption go more smoothly? Yes No
19. Are you willing to be a support contact for a family you have done a home check on, once they have adopted a dog from GDRA? Yes No

If Interested in Fostering

**** We regret to inform you that anyone doing in home child care may not participate in our Fostering Program. ****

20. Are your pets alone during the day? Yes No
- a) If Yes, for how long on average? _____ Maximum: _____
21. Have you owned a dog before? Yes No
- a) If so, what happened to it/them? _____
22. How many people live in your household? _____
- a) What is their relationship to you? _____
- b) If children, what are their ages & sex? _____
23. Are any family members home during the day? Yes No
- a) If Yes, who? _____
- b) If No, how long will dog be alone during the day? _____
24. Do you own or rent your home? _____
- a) How long at present address? _____
- b) If less than 2 years, what was your previous address? _____
- c) If renting, does your lease allow pets? Yes No

***** Please Supply A Copy of Lease Agreement Pertaining To Pets *****

25. Is your yard fenced? Yes No **(Electric Fence not acceptable)**

26. Where will you keep the dog when away overnight or on vacation? _____

27. Have you ever taken in a dog that you did NOT raise from a puppy? Yes No

28. Have you ever cared for a friend's dog in your own home? Yes No

29. Are you familiar with the transitional period that dogs go through when they are removed from their home/a shelter and begin to settle into a new home? Yes No

30. What are some behaviors that you can expect? _____

31. Do you have an area where you can keep a foster dog separated from your pets/family until he/she has adjusted to your home? Yes No

a) Please describe how you will separate: _____

32. How do you feel about crate training? _____

33. If a dog tears up a couch cushion or pees in the house while you are gone, how would you correct him? _____

34. How would you teach a new dog to sit? What would you do if they did not sit when ask?

35. When walking your foster dog or bringing your personal dog to events, we require the use of either a martingale collar, a head harness or a body harness. The use of prong collars, electronic collars and choke collars are prohibited.

36. Would you be willing to foster a dog with one of the following handicaps/issues?

Physical Deaf Not good with cats/small animals

Old Not good with children Not good with other dogs

Other (explain) _____

37. Are you familiar with bloat and recommendations for prevention? Yes No

If there are other ways you can think of to assist GDR Alliance, any and all ideas are appreciated!

THE UNDERSIGNED ACKNOWLEDGES THAT THE VOLUNTEER APPLICATION PROCESS IS NOT COMPLETED UNTIL **Great Dane Rescue Alliance, Inc** APPROVES YOU AS A VOLUNTEER.

Signature of Applicant(s) _____

Date: _____

(Attach a Separate sheet for Additional Information or Comments)

ALL adults residing at this household MUST sign this form. All future residents of house must complete this waiver upon residence.

VOLUNTEER LIABILITY RELEASE AND WAIVER FORM

This volunteer agreement ("Agreement") is entered into as of the date set forth below, by and between the person(s) named below and the Great Dane Rescue Alliance, Inc.

WHEREAS, Great Dane Rescue Alliance, Inc. is the owner of any Great Danes the volunteer transports, fosters, or handles (to include transporting the Dane to and from obedience classes and training activities, working and handling the Dane in public and private areas, and providing necessary care to ensure the Dane's safety), beginning on the date this agreement is signed.

AND WHEREAS, the Volunteer has voluntarily contacted Great Dane Rescue Alliance, Inc. and has expressed an interest in working with dogs in the care and custody of GDR Alliance. In consideration of Great Dane Rescue Alliance, Inc.'s agreement to allow the volunteer to view and/or interact with such dogs, the volunteer hereby, for his/her heirs, his/her personal representatives, and him/herself represent and warrant as follows:

1. The volunteer is fully aware of the risks that dogs pose and have elected to view and/or interact with one or more dogs in the care of Great Dane Rescue Alliance, Inc. voluntarily. The volunteer knowingly assumes all risks that exposure to dogs may pose, including but not limited to property damage, bodily injury, serious bodily injury and/or death.

2. I hereby waive, release, discharge, hold harmless, and promise to indemnify and not bring suit against GDRA, its directors, officers, volunteers, staff, and all other agents, and attorneys (hereinafter collectively "GDRA") for any of the referenced parties, and any other parties acting for, or on the behalf of any of the referenced parties, from any and all rights and claims which I have or which may hereafter accrue to me and from any and all damages which may be sustained by me directly or indirectly in connection with, or arising out of, my exposure to such dogs. The undersigned will defend and indemnify GDRA for any claims made against GDRA by the undersigned, his or her heirs, personal representative(s), or his or her minor children, while I attend any activities or functions of GDRA, as a result of any action(s) by any dog(s).

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed this _____ day of _____, 20_____.

If a GDRA representative is not available, volunteer is to have the following notarized.

Signature of Applicant _____ Print Name _____

Signature of Applicant _____ Print Name _____

Signature of Witness _____ Print Name _____

