

WESTIE RESCUE MICHIGAN
VOLUNTEER FORM

6/16/12

(This form is designed for volunteers who will not have custody of a foster dog. If volunteering to foster, please use the Foster Volunteer Form.)

PART 1: PERSONAL INFORMATION

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

CONTACTS: PHONE 1: _____ PHONE 2: _____

CELL: _____ EMAIL: _____

OTHER: _____

VOLUNTEER AREAS: Transporting Fundraising

Other (explain:) _____

PART 1 (Transporters)

*What area are you willing to cover if the dog requires transportation?

Entire state Metro Area Lower Peninsula only, Other (detail) _____

In an emergency would you take others that did not fit the criteria above? _____

What Medical limits will you impose in transporting dog? _____

What is the maximum number of dogs you will transport at one time? _____

Will you agree to keep the transported dog safely crated and on leash whenever removed from the crate? _____

Will you agree to follow all rules and to inform Rescue, prior to the transport, if there is a requirement stated that you do not feel you can follow? _____

Do you understand that a commitment to transport is often critical to the dog's ultimate safety and cannot lightly be broken? You will always make every effort to keep your commitment and to inform Rescue as soon as possible if you cannot keep it. _____

PLEASE NOTE: We are unable to place a dog who has bitten and broken the skin. We will almost surely have to put it down. Therefore it is essential that we be very careful and not put a frightened dog into a position where it might bite if it is avoidable. (Note: We do our best to not accept aggressive dogs but it could happen. See our limitations statement under the Surrender Button on the website.)

Your comments and suggestions:

PART 2: REFERENCES (All Volunteers)

Please list 3 references who can attest to your suitability as a pet owner, and more specifically, a volunteer for Westie Rescue. If you own any pets now, please include your vet as a reference.

REFERENCE 1: VETERINARIAN

NAME: _____

PHONE: _____

REFERENCE 2: PERSONAL

NAME: _____

PHONE: _____

RELATIONSHIP: _____

REFERENCE 3: PERSONAL

NAME: _____

PHONE: _____

RELATIONSHIP: _____

I, the undersigned, attest that, to the best of my knowledge, the above information is accurate and complete at the time of signing, and I understand that falsely provided information can mean that my application will be terminated.

SIGNATURE: _____ DATE: _____

PLEASE RETURN THIS FORM, AT YOUR EARLIEST CONVENIENCE TO:
WESTIE RESCUE MICHIGAN
JEAN STORY
1283 Boichot Rd.
Lansing, MI 48906

If you have any questions about this form or about volunteering, please call Jean Story at 517-267-8838. **PLEASE PRINT IT, SIGN IT AND MAIL IT IN.**

Note: You are advised to consider carrying an individual umbrella liability policy of at least \$1 million; it is a very inexpensive form of protection. While we have never been sued for anything related to rescue, it is always better to be protected. Also, be sure your own dog's shots are up to date, including Bordetella and that your dog is on a heartworm preventative. If you are fostering, you might want to consider using a brand such as Sentinel which kills various internal parasites that new fosters might bring in. A photostatic copy of this executed document shall be considered as valid as the original.