

Volunteer Profile

Thank you for your interest in becoming a Wolf Sanctuary of PA volunteer. Please complete the profile below, read the volunteer performance guidelines and sign the volunteer waiver. Bring your completed profile and wavier to your scheduled volunteer orientation. Thank you!

Personal Information:

(Information is for Wolf Sanctuary of PA use only)

Date Completed: ____ / ____ / ____

Name: _____ Date of Birth: ____ / ____ / ____

Mailing Address: _____ City _____ Zip _____

Home Phone: _____ Work Phone: _____ May we contact you at work? _____

Cell Phone: _____ Email Address: _____

Emergency Contact Name: _____ Relationship: _____

Primary Phone: _____ Alternate Phone (please list type): _____

Have you visited the sanctuary for a tour? Yes No If so, when was your most recent visit?

Are you currently a student? Yes No If so, where?

Are you currently a employed? Yes No If so, where?

Indicate which program(s) that you are interested in participating in:

- | | | |
|--------------------------------------------|----------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> Animal Enrichment | <input type="checkbox"/> Animal Photographer | <input type="checkbox"/> Tours |
| <input type="checkbox"/> Public Outreach | <input type="checkbox"/> Development | <input type="checkbox"/> Landscaping |
| <input type="checkbox"/> Education | <input type="checkbox"/> Animal Care | <input type="checkbox"/> General Office Assistant |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Enclosure Repair | <input type="checkbox"/> Veterinary Care |

Indicate any of the following skills or experience you have:

- | | | |
|--------------------------------------------------------|--------------------------------------------------|----------------------------------------|
| <input type="checkbox"/> Data Entry | <input type="checkbox"/> Carpentry/ Construction | <input type="checkbox"/> Dog Training |
| <input type="checkbox"/> Event Planning | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Grant Writing |
| <input type="checkbox"/> Animal Care | <input type="checkbox"/> Maintenance | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Writing (for publication) | <input type="checkbox"/> Graphic Design | <input type="checkbox"/> Education |
| <input type="checkbox"/> Second Language (please list) | _____ | |



465 Speedwell Forge Rd. Lititz PA 17543
wolfsanctuary@gmail.com

Please answer the following questions so we may get to know you better:

How did you hear about our volunteer opportunities? _____

Have you had any previous experience as a volunteer? If so, where and what kind of work did you do?

Why have you chosen to volunteer with Wolf Sanctuary of PA? _____

What are your hobbies and interests? Are you involved with any other clubs, organizations or associations?

What kind of work experience do you have relative to the volunteer position(s) you are interested in?

Do you have any physical limitations, medical conditions, or allergies that we should be aware of?

On average, how many hours could you commit each month? Are there any days you prefer to volunteer?

Are you able to commit to a minimum of three hours per week? Yes No

Are you able to make a minimum six-month commitment? Yes No

If no, why? _____

Do you have a valid Pennsylvania driver's license? Yes No

Do you have your own transportation? Yes No Is it 4WD/AWD? Yes No

Is there any other information that you would like to provide? _____

Wolf Sanctuary of PA Volunteer Agreement Terms & Conditions

1. I have read and am in agreement with the mission, goals, and services of Wolf Sanctuary of PA. I have read and will abide by the Volunteer Performance Guidelines.
2. My services to Wolf Sanctuary of PA are provided strictly in a voluntary capacity as a volunteer, and without any expressed or implied promise of salary, compensation or other payment of any kind whatsoever. I am not an employee of Wolf Sanctuary of PA.
3. My services are furnished without any employment-type benefits, including employment insurance programs, unemployment insurance, worker's compensation, vacations, or sick time.
4. I will familiarize myself and comply Wolf Sanctuary of PA policies and procedures applicable to volunteers. In particular, I fully understand that Wolf Sanctuary of PA expects high standards of moral and ethical treatment of the animals under its care. I will adhere strictly to these standards in my capacity as a volunteer.
5. I will hold absolutely confidential all information that I may see concerning animals, staff, donors and volunteers. I agree not to seek or obtain confidential information from Wolf Sanctuary of PA. I understand that an intentional violation of confidentiality may result in disciplinary action, including my dismissal as a volunteer Wolf Sanctuary of PA and/or possible legal action.

Acknowledgment & Assumption of Risks

Wolf Sanctuary of PA maintains high levels of training and employs experienced animal handlers and activity leaders. However, volunteer activities may involve risks, hazards, and dangers. Some risks are inherent in the activities and cannot be eliminated or reduced. **These inherent and other risks, hazards, and dangers can cause injury, property damage, illness, mental or emotional trauma, disability, or death.** I understand that Wolf Sanctuary of PA does not want to frighten me or reduce my enthusiasm for these activities, but believes that it is important for me to know in advance what to expect and to be informed of the risks.

Some, but not all of these risks, hazards, and dangers include: physical injury from animals, bites, scratches, clawing, allergic reactions, and animal borne illnesses. Wolf Sanctuary of PA staff must make various judgments and decisions as they conduct activities in changing environments. These judgments are, by their nature, imprecise and subject to error. Consequently, there are risks involved in decision making and conduct, including, without limitation, the risk that a Wolf Sanctuary of PA representative may misjudge an animal.

I understand that the above description of risks is not complete and that other unknown or unanticipated risks, hazards and dangers may result in injury, damage or other loss. I acknowledge that Wolf Sanctuary of PA staff is, and have been available, should I have further questions about the nature and physical demands of these activities and the risks, hazards and dangers associated with these activities. I understand the presence of Wolf Sanctuary of PA personnel is no assurance of my safety or the lessening of these risks.

My participation in these activities is purely voluntary and I choose to participate in spite of and with knowledge of these risks. Therefore, I, assume and accept full responsibility for myself, for those risks identified here and for those risks not identified, and for injury, death, property loss or expenses suffered by myself and them, resulting from those risks, and resulting from my own negligence.

Assumption of Risk, General Release & Indemnity Agreement

I for and on behalf of myself and my children, heirs, executors, administrators and representative, agree to release, indemnify and defend Wolf Sanctuary of PA its officers, employees and representatives with respect to all claims, liabilities, losses, suits or expenses (including costs and reasonable attorneys fees) made or brought by anyone, arising out of any injury, damage, death, or other loss in any way connected with my participation in Wolf Sanctuary of PA activities or use of Wolf Sanctuary of PA equipment or facilities. **This agreement includes any losses claimed to be caused, in whole or in part, by the negligence of Wolf Sanctuary of PA. I understand I agree here to waive all claims against Wolf Sanctuary of PA, and agree that neither I, nor anyone acting on my behalf, will make a claim or file a lawsuit of any kind against Wolf Sanctuary of PA, as a result of any injury, damage, death or other loss suffered by me.**

I agree that this and all other aspects of my relationship with Wolf Sanctuary of PA are governed by Pennsylvania State law. Further, any mediation, suit, or other proceeding arising out of or relating to my participation in Wolf Sanctuary of PA activities, must be filed exclusively in the State of Pennsylvania, and Pennsylvania State law shall apply. **I also agree that if I assert a claim or file(s) a suit against Wolf Sanctuary of PA, I will pay all costs and attorney's fees incurred by Wolf Sanctuary of PA in defending that claim or suit, if the claim or suit is withdrawn or dismissed, or to the extent a court determines that Wolf Sanctuary of PA is not responsible for the injury or loss.**

I authorize Wolf Sanctuary of PA personnel to obtain or provide medical care for me, or to transport me to a medical facility. I further authorize Wolf Sanctuary of PA staff or other medical personnel to render such treatment they deem necessary for my health. I agree that Wolf Sanctuary of PA has no responsibility for medical care provided to me, and I agree to pay all costs associated with such care or evacuation whether or not authorized by me.

Any portion of this Document deemed unlawful or unenforceable shall not affect the remaining provisions of the Document, and those remaining provisions shall continue in full force and effect.

I have carefully read, understand, and voluntarily sign this document and acknowledge that it shall be effective and binding upon myself, my family, heirs, executors, representatives and estate.

Volunteer Signature

Date

Please Print Name

Photo Release

I authorize Wolf Sanctuary of PA, and/or parties designated by Wolf Sanctuary of PA, to use my photo for sale or reproduction in any manner Wolf Sanctuary of PA desires, for advertising, display, audiovisual, exhibition or editorial use.

Volunteer Signature

Date

Please Print Name