Rabbit Advocate Volunteer Application

OUR PURPOSE is to promote the welfare of domestic rabbits.

WE BELIEVE that rabbits deserve to be treated with compassion and valued as companion animals.

OUR GOALS ARE:
- To educate the public about the physical and social needs of domestic rabbits.
- To promote the adoption of homeless rabbits from foster homes, shelters, and rescue groups into loving homes.
- To reduce rabbit overpopulation by promoting rabbit spays and neuters.

WE SUPPORT EACH OTHER in attaining these goals with free and open communication and by demonstrating mutual respect and consideration.

Name ______________________________________________
Are you 18 years or older? □ Yes □ No
Address ____________________________________________
City __________________________ State _________ Zip ________
Phone __________________________ Work Phone _______________
E-mail __________________________
Emergency contact and phone number _______________________

Employer __________________________ Occupation/Position __________________________

When are you available to volunteer? □ Weekends □ Weekdays □ Evenings

Please list any skills, interests or hobbies that you feel would be of benefit to the Rabbit Advocates
________________________________________________________
________________________________________________________

Please list previous and current volunteer experiences, including organization names and dates served
________________________________________________________
________________________________________________________

Tell us about your experience with animals
________________________________________________________
________________________________________________________
Why do you want to volunteer with the Rabbit Advocates?  
________________________________________________________________________
________________________________________________________________________

Please furnish a copy of your Driver’s License or Photo Identification.

Do you have?  ☐ Auto Insurance    ☐ Home Owner or Renter Liability Insurance

Have you read, and are you in agreement with, our mission statement and philosophy statement?

☐ Yes  ☐ If no, please explain __________________________________________________________________________

By submitting this application I attest that I:
✓ Will abide by the policies and procedures of the Rabbit Advocate organization
✓ Intend to contribute time and energy toward the Rabbit Advocate goals
✓ Will participate in meetings and volunteer activities
✓ Will not breed rabbits
✓ Will not abuse or neglect any animal
✓ Will demonstrate courtesy and respect to others, and a willingness to learn from them
✓ Have submitted true and accurate information on this document

Signature ____________________________ Date __________________________

CONSENT – RELEASE

I understand that my participation in any of the volunteer opportunities with the Rabbit Advocates is strictly on a volunteer basis. Therefore, no insurance against bodily harm is provided for me. I agree to release the Rabbit Advocates, a non-profit organization, its officers and directors, from any and all injuries, loss, damage, liability, claims, cost and expense including legal fees incurred during my participation as a volunteer with the Rabbit Advocates.

I have carefully read, understand and agree with the contents of this document and I sign this document voluntarily.

Signature ____________________________ Date __________________________

If volunteer is under 18 –
As a parent/guardian I understand that my child volunteers at his/her own risk. I hereby grant permission for him/her to perform volunteer work with the Rabbit Advocates.

Parent/Guardian Signature ____________________________ Date __________________________