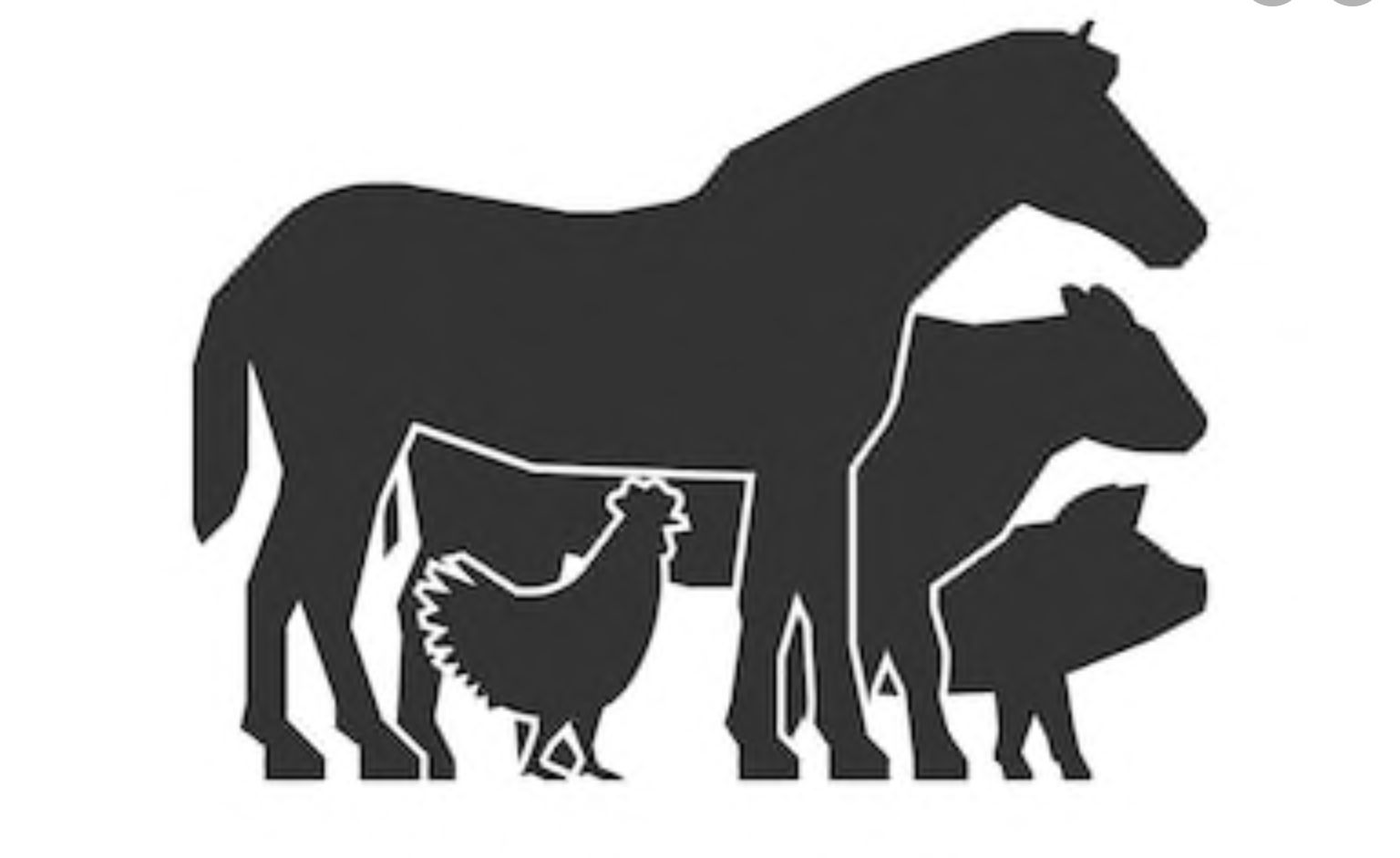
**REFUGE RANCH ANIMAL SANCTUARY, INC.**

**36584 TRILBY RD, DADE CITY FL, 33523. (352)610-4373**

[**WWW.REFUGERANCHANIMALSANCTUARY.COM**](http://www.refugeranchanimalsanctuary.com)

## Volunteer Application

**Applicant Information**

**Name:**

**Date:**

**Date of Birth:**

**Street Address:**

**City: State: ZIP:**

**Daytime Phone:** ( ) **Cell Phone:** ( )

**Email:**

**Occupation: Employer:**

**Emergency Contact:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Name Relationship to You Phone Number(s) **How did you hear about this opportunity?**

**What do you hope to gain from volunteering with Refuge Ranch Animal Sanctuary, Inc.?**

**Related Education and Experience**

Please list any educational degrees, programs, or courses you have taken that you believe would be helpful as a volunteer with RRAS. Please include present enrollments and use an additional sheet, if necessary. You may attach transcripts if you wish them to be considered as part of this form.

**Name of School Dates Attended Major(s) Degree/Certification**

**If you are seeking credit for school-mandated community service, please indicate your school and number of required hours:**

Community Service Coordinator: Phone:

**Have you ever volunteered with The RRAS before?** Yes No

**If yes, when and in what capacity? Have you been trained as an animal rescue volunteer?** Yes No

**If no, would you like to learn about volunteering with our Animal Rescue Team?** Yes No

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**Do you have previous experience working with animals? If yes, please describe the species you have experience with and the nature of the work.**

**If you have ever volunteered for or worked with another animal organization, please provide the name(s) and dates of your service.**

**Areas of Service**

**Please indicate your areas of interest:** *(please check all that apply)*

\_\_\_\_ **Direct Care–Equine:** Assist with feeding, watering, and equine medical treatments or during herd health procedures, groom/bathe special needs equines as instructed, and clean enclosures which may include shoveling manure, raking, weeding, and scrubbing water troughs

\_\_\_\_ **Grounds-keeping/Maintenance:** Assist with general maintenance of sanctuary, equipment, and grounds by mowing, weeding, clearing brush from pastures and/or fence lines, maintaining memorial and other garden areas \_\_\_\_ **Office Assistant:** Provide administrative support to staff by helping with common office duties and volunteer scheduling

\_\_\_\_ **Outreach/Events:** Promote Refuge by interacting with the general public, answering any questions, providing information about opportunities for individuals and businesses to get involved, identifying additional outreach opportunities, and assisting with event planning

\_\_\_\_ **Volunteer Leadership:** Help develop our volunteer program by participating in a volunteer leadership team, helping to deliver volunteer orientations and training, and helping to engage volunteers more fully in our work

**Please identify any additional skills you are able to offer:** *(please circle all that apply)*

Construction/General Repairs Customer Service Data Entry/Administrative Emergency Response Experience Driving Heavy/Farm Equipment Fundraising Licensed Veterinarian or Veterinary Technician Marketing/Advertising Photography/Videography Public Speaking Soliciting In-kind Donations Special Events Training/Teaching/Humane Education Volunteer Coordination

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Additional comments:

**Availability**

*Please check the days/times you are likely to be available to volunteer.*

**Sundays Mondays Tuesdays Wednesdays Thursdays Fridays Saturdays Mornings**

**Afternoons**

**Evenings**

**Additional Information**

**Have you been convicted of a felony in the past five years?** Yes No

**If yes, please briefly explain:** *(A felony conviction does not constitute an automatic bar to acceptance of this form.*

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*Revised 2020*

*Convictions will only be considered in relation to specific volunteer requirements.)*

**If you proceed with joining our program, you will be required to sign a Waiver and Release of Liability, as well as undergo a background check. Are you willing to do so?** Yes No

Any additional comments:

This application is the first step in the process of becoming a volunteer for The RRAS and its affiliates. Most applicants must pass a background check and complete a training program before becoming official members of the team.

**Please read and sign below:**

I understand that background inquiries will be made and should investigation at any time disclose any misrepresentation or falsification, my application may be rejected, or I may be dismissed from service at The RRAS. I certify that all the information on this application is true and complete.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Printed Name of Applicant

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Applicant Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Printed Name of □ Parent or □ Guardian (if under 18)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Parent or Guardian (if under 18) Date

**Please submit this form to the following email address:**

refuge.ranch01@gmail.com

**Or mail to:**

541-459-9915

Refuge Ranch Animal Sanctuary

36584 Trilby Rd

Dade City, FL 33523

**If you have any questions, please call:**

(352) 610-4373

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