

Feathered Friends Sanctuary and Rescue, Inc.  
1570 County Highway A  
Edgerton, WI 53534

### Volunteer Application

Thank you for volunteering to help Feathered Friends Sanctuary and Rescue, Inc. This application is designed to provide us with the information we need to match you with our volunteer opportunities. Following a review of your application, a representative of Feathered Friends Sanctuary and Rescue, Inc. will contact you.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (home) \_\_\_\_\_ (cell) \_\_\_\_\_

Email Address \_\_\_\_\_

How did you hear about Feathered Friends Sanctuary and Rescue, Inc.? \_\_\_\_\_

Have you worked with parrots before? \_\_\_\_\_ If so, where? \_\_\_\_\_

Do you have parrots of your own? \_\_\_\_\_

If so, how many? \_\_\_\_\_ What kind? \_\_\_\_\_

Have you volunteered at any other Shelters or Rescues? \_\_\_\_\_ If so, where? \_\_\_\_\_

Why did you leave? \_\_\_\_\_

### Volunteer Interests And Expertise (Please check your interests)

\_\_\_\_\_ In-shelter care: I can help give the parrots food, water, and can clean cages, sweep, vacuum, socialize the parrots, and do any other jobs that need to be done at the sanctuary. We need volunteers 7 days a week to do these jobs. Our volunteers arrive at 10:30 a.m. each day, and work for 2-3 hrs. After the work is done, then you may socialize with the parrots. You are making a commitment to volunteer at least 4 hrs. per month.

What days are you available? Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ Wednesday \_\_\_\_\_ Thursday \_\_\_\_\_

Friday \_\_\_\_\_ Saturday \_\_\_\_\_ Sunday \_\_\_\_\_

\_\_\_\_\_ **Special Events:** I am interested in attending special events and fundraisers throughout the year, helping set up Feathered Friends Sanctuary and Rescue, Inc. information booth, and answering questions about the sanctuary.

\_\_\_\_\_ **Fundraising:** I can help organize fundraising efforts and/or collect donations of supplies or equipment to help Feathered Friends Sanctuary and Rescue, Inc.

\_\_\_\_\_ **Transportation:** I can provide transportaion for surrendered or rescued parrots, parrots visiting the vet, or supplies and equipment.

Drivers License # \_\_\_\_\_

\_\_\_\_\_ **Education/Consultation:** I am an experienced bird keeper and would like to share my knowledge with our volunteers, groups or advise new or current bird owners on proper bird care.

\_\_\_\_\_ **Administration:** I can help Feathered Friends Sanctuary and Rescue, Inc. with office and administrative duties.

\_\_\_\_\_ **Photographer:** I have a digital camera and would like to help take pictures of incoming parrots for our website.

\_\_\_\_\_ **Humane Education:** I am willing to go into classrooms and help Feathered Friends education staff members teach the children about responsible care of animals and pet ownership.

\_\_\_\_\_ **Adoption Outreach:** I am interested in helping at various off-site locations, spending time educating the public about our sanctuary (it's policies and procedures), and answering questions about our available parrots.

\_\_\_\_\_ **Veterinary Care:** I am an avian veterinarian in the Madison, Wisconsin, area and would like to donate my services to Feathered Friends Sanctuary and Rescue, Inc.

\_\_\_\_\_ **Other:** I have another skill that is not listed here and would like to help Feathered Friends in this area.

Please list: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Questions or comments you have for us or about Feathered Friends: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Your Signature \_\_\_\_\_

Date: \_\_\_\_\_

Thank You! We hope to have you volunteering with us in the near future!

***Feathered Friends Sanctuary and Rescue, Inc. Volunteer Confidentiality Agreement***

I, \_\_\_\_\_ understand and agree that I must maintain and safeguard the  
(Please print)  
**Confidentiality of information I may obtain through my activities as a *Feathered Friends Sanctuary and Rescue Inc. volunteer.***

Confidentiality is a critical ethical issue in volunteer relationships. Volunteers are involved in relationships with people surrendering their birds during difficult times. These families have a right to expect their experiences and decisions will be kept strictly private and confidential. A trusting relationship honoring an individual's Right to Privacy is necessary for the surrendering parties to feel safe and comfortable in expressing his or her true feelings and concerns. Any and all personal information must be held in the utmost confidence.

I agree not to divulge, publish, or otherwise make known to unauthorized persons or to the public any identifiable, personal information, which is obtained in the course of my service as a volunteer. I understand that the surrendering parties written authorization is required for me to disclose any such information, and that this authorization must be obtained with an official *Feathered Friends Sanctuary* release form.

Volunteers are not to discuss or disclose confidential information concerning surrendering parties in circumstances where an unauthorized person may overhear the conversation.

**Confidential information also includes:**

- 1. Data or information which identifies a surrendering party or their family**
- 2. Assessment forms, referral forms and computer records**
- 3. Information received verbally from the surrendering party**
- 4. Admission to or use of any veterinary care services, and all information and records compiled, obtained, or maintained by veterinary care workers and by me in the course of providing services**
- 5. Any fund raising ideas, proposals or upcoming projects unless specifically instructed to do so by a *Feathered Friends Sanctuary* Board of Directors officer**
- 6. No talking to the press, under any circumstances without prior approval**
- 7. Any personal information I obtain regarding any of the other volunteers, this includes the Board of Directors**

**I recognize that unauthorized release of confidential information may result in legal penalties including possible fines or lawsuits by the surrendering party or family. As a *Feathered Friends Sanctuary Inc.* volunteer I understand that I may be terminated if I disclose confidential information without the surrendering parties written authorization or with out the authorization of a member of the Board of Directors.**

**I understand and agree to the above policy, and I am aware that a breach of confidentiality will be grounds for dismissal in my role as a volunteer.**

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**Volunteer Signature**

**Date**

# Feathered Friends Sanctuary & Rescue, Inc.

## Volunteer Release Agreement and Covenant Not to Sue

I, the undersigned, do hereby agree to release *Feathered Friends Sanctuary & Rescue, Inc.* from all liability. I will not hold *Feathered Friends Sanctuary & Rescue, Inc.* liable for any damage, illness or injury sustained during volunteer work. I, the undersigned, will never institute any action or suit at law or in equity against *Feathered Friends Sanctuary & Rescue, Inc.*, nor institute, prosecute or in any way aid, assist or participate, directly or indirectly, in the institution or prosecution of any claim, demand, action or cause of action for damages, costs, loss of services, expenses, or compensation for or on account of any damage, loss or injury either to person or property, or both, resulting from contact with or the actions or conduct of any animal located at or in the custody or control of or in releases, demises, and discharges *Feathered Friends Sanctuary & Rescue, Inc.* and covenants and agrees to defend, indemnify and hold *Feathered Friends Sanctuary & Rescue, Inc.* harmless of and from demands, damages, suites, costs or expenses said volunteer's had or may have for any reason or which may occur or arise by reason of volunteer's association, activity or work now, heretofore or hereafter at or with *Feathered Friends Sanctuary & Rescue, Inc.*

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*Name (please print)*

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*Address*

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*City*

*WI*

*Zip Code*

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*Phone number*

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*Volunteer Signature*

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*Birthday (Month and Day)*