

## **Membership Application & Volunteer Form**

Northern California Sled Dog Rescue (NorSled)
P.O. Box 30877, Walnut Creek, CA 94598

rescue@norsled.org www.norsled.org

Please return this completed form with annual dues (*listed below*) to a NorSled event or submit to the above address. *Thank you!* 

Name						
Address						
City			State	Zip	)	
Home Phone	Work Phone_			Cell		
email	Alte	rnate em	ıail			
Emergency Contact						
Annual Dues	Individual \$20	Family	\$30	Organiza	ation \$50	
Membership dues wai	ved in lieu of				(Requires	Board Approval)
Volunteering Interests	/Experience <i>(please indi</i>	cate as r	many	as applyto you):		
Adoption Fairs	Fostering		(	Outreach/Marketing		Tracking Shelter Dogs
Database Support	Foster to Adopt	-	F	Rescue Hotline		
Newsletter	Fundraising	-		Transport		
Other						
Do vou have a valid di	river's license? C	current a	utomo	obile insurance?		

## Agreed to and accepted by:

I/we agree to hold Northern California Sled Dog Rescue (NorSled) harmless for any personal injuries or damages suffered by, me/us members of our household or guests caused by any dog fostered by me/us, NorSled, its members or its agents.

Signature	Date	
Signature	Date	

I hereby agree that if I am accepted as a member and volunteer worker for Northern California Sled Dog Rescue ("NorSled"), I agree to comply with all of the rules and policies which may be established from time to time by NorSled, including without limitation any rules and policies applicable to volunteers providing foster care for NorSled dogs. I understand that failure to comply with the rules and policies of NorSled may result in my immediate termination as a volunteer. Further, NorSled may terminate my service as a volunteer at any time in its discretion.

I understand and agree that if accepted as a volunteer, all services performed by me will be performed on a strictly voluntary basis, and that I will receive no remuneration, pay or compensation of any kind, that I will not be an employee of NorSled nor otherwise receive any health, disability or Workers Compensation insurance or any other benefits normally available to employees of NorSled, and that NorSled will incur no liability of any nature as a result of my volunteering for NorSled. I will not be reimbursed for expenses unless pre-approved by NorSled's President or board in writing. No personal use of donated items or NorSled property is permitted without prior approval. I understand that NorSled records are to be kept confidential. I understand that I am not authorized to represent NorSled in any official capacity (i.e. in the news media, at public events or in the general public) without prior permission.

I acknowledge that in handling animals and performing other volunteer tasks there exists a risk of injury including physical harm or death, and that all services performed by me will be done solely at my own risk and expense. I am familiar with behavior, temperament and other issues particular to Northern breed dogs such as Huskies, Malamutes and Samoyeds. I also understand that NorSled dogs usually come directly from animal shelters and may not have been evaluated for health or temperament. Therefore, in consideration of being permitted to serve as a member or volunteer, I hereby waive, release, discharge, indemnify and hold harmless NorSled and its assigns, successors, agents, staff, officers, board of directors, employees, volunteers, contractors, and representatives from any and all claims, injuries, death, property damage, causes of action, and/or demands of any nature of cause and under any theories whatsoever, including costs and attorney fees, arising out of or relating to my volunteering with NorSled, including, but not limited to, animal bites, automobile and other accidents, death or injuries, whether or not arising out of the negligence, carelessness and/or other wrongful conduct of NorSled or any other parties. NorSled specifically disclaims and I waive my rights to make any claims regarding any and all of the foregoing. I will at all times refrain from engaging in any work which I am not physically capable of performing or which poses a degree of risk that I do not wish to assume. Any motor vehicle I use in volunteering for NorSled will be insured to the extent required by law and I will not drive without a valid driver's license and automobile insurance.

I understand that public relations are an important part of volunteering with NorSled. On behalf of myself, my heirs and personal representatives, if accepted as a volunteer, I give NorSled permission to use and publish photographs taken of me as a volunteer for use in its public relations efforts.

NorSled feels it is important for all staff and volunteers to be current on their tetanus vaccination, particularly if they will be handling animals. If a member of the staff or a volunteer has questions about the tetanus vaccination, he or she is encouraged to consult a physician, at his or her own expense, to decide whether or not to be vaccinated against tetanus. I release NorSled from all responsibility that may occur because of my not being vaccinated against tetanus. I understand that whatever decision I make regarding a tetanus vaccination is my own decision and is made at my own risk. NorSled feels it is important for all staff members and volunteers, particularly those who will be handling animals, to be aware that a pre-exposure rabies vaccination series is available. If a staff member or a volunteer has questions about the pre-exposure rabies vaccination, he or she is encouraged to consult a physician, at his or her own expense, to decide whether or not to be vaccinated. I release NorSled from all responsibility that may occur because of my not pursuing the pre-rabies exposure vaccination series and I understand that whatever decision I make regarding this vaccination is my own decision and is made at my own risk. I authorize NorSled to seek emergency medical treatment in case of injury, accident or illness. I understand that in the event that I am injured or contract any illness while acting as a NorSled volunteer that I am not covered by California State Worker's Compensation Law.

I represent and warrant that I am over the age of 18 years. This Agreement is the entire agreement between myself and NorSled and may not be modified except in a writing signed by NorSled's President. The provisions of this Agreement are binding upon myself and my heirs, assigns and successors in interest. If any provision of this Agreement is held to be invalid or unenforceable by a court of competent jurisdiction, such provision will be deemed modified to eliminate the invalid portion and as so modified will be deemed a part of this Agreement as though originally included herein. This Agreement is subject to California law and has been entered into and fully performed in Vallejo, California.