



# RAPS Volunteer Application

Richmond Animal Protection Society  
12071 No. 5 Rd, Richmond, BC V7A 4E9  
604-275-2036 / www.rapsociety.com

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

## CONTACT INFORMATION

**\*\*Note: Volunteers must be over 16 years old to volunteer without an adult.\*\***

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Emergency Contact #: \_\_\_\_\_

## VOLUNTEERING INFORMATION

Preferred Location(s):  Richmond Animal Shelter  RAPS Cat Sanctuary

Preferred Volunteering Position (check all that apply):

**City Shelter Cat Room Cleaner and Caretaker** -- 2-3 hour shifts between 9:00 AM and 12:00 PM daily to clean the large cat room at the Richmond Animal Shelter.

**Sanctuary Cat Room Cleaner and Caretaker** -- 2-3 hour shifts to clean cat boxes. Various shifts available.

**Specialty Cat Room Cleaner and Caretaker** -- 2-3 hour shifts between 9:00 AM and 12:00 PM daily to clean either the small cat room (for recovering cats), the kitten room (for kittens in quarantine) or the senior cat room at the Richmond Animal Shelter.

**Volunteer Dishwasher and Laundry Manager**-- 2-3 hour shifts between 9:00 AM and 12:00 PM daily to wash cat and dog food dishes, manage the laundry room (i.e. washing, folding, organizing) at the Richmond Animal Shelter.

**Rabbit Room Cleaner and Caretaker** -- 2-3 hour shifts between 9:00 AM and 12:00 PM daily to clean rabbit cages and attend to the special needs of the shelter rabbits at the Richmond Animal Shelter.

**Shelter Ambassadors (19 years and older)** – (This position is for volunteers who have been with RAPS for over 3 months.) Greet and assist the public when they arrive to visit the animals for adoption. Shifts are available between 1:00 PM and 4:30 PM Wednesday through Sunday. A 3-month commitment and special training is required for this position. You must interview to be chosen for this position.

**RAPS Dog Handler** – Position for experienced dog handlers to exercise our shelter dogs. Minimum commitment is 2-3 two-hour shifts per week. Includes walking, running or just generally playing with shelter dogs. A safety orientation is required.

Please describe your previous volunteer experience (with or without animals):

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## AVAILABILITY TO VOLUNTEER

### To volunteer at the Richmond Animal Shelter:

9:00 AM to 12:00 PM on (circle days you would like to volunteer)

Monday      Tuesday      Wednesday      Thursday      Friday      Saturday      Sunday

Other times you are available? \_\_\_\_\_

### To volunteer at the RAPS Cat Sanctuary:

Monday (list times): \_\_\_\_\_

Tuesday (list times): \_\_\_\_\_

Wednesday (list times): \_\_\_\_\_

Thursday (list times): \_\_\_\_\_

Friday (list times): \_\_\_\_\_

Saturday (list times): \_\_\_\_\_

Sunday (list times): \_\_\_\_\_

## Volunteer Agreement and Release Form (required)

In consideration of being permitted to participate in the Volunteer Programs of the Richmond Animal Shelter, I the undersigned agree to assume all risk of loss or injury including death to myself or damage to my property while on the premises of the Richmond Animal Shelter, and elsewhere resulting directly or indirectly from my involvement and participation in any of the Volunteer Programs.

This agreement shall be binding upon me and my heirs, next of kin, executors, administrators and assigns. I hereby release and waive any right of action I presently have or may in the future acquire against the Richmond Animal Shelter, their heirs, assigns, servants, agents or volunteers for any such loss or injury, even though such loss or injury is caused by the negligence or default of the Richmond Animal Shelter, its servants, agents or its volunteers, whether acting in the scope of employment or not.

I acknowledge that the animals of the Richmond Animal Shelter are not trained by the Richmond Animal Shelter and that they can be unpredictable and dangerous. I also acknowledge the Richmond Animal Shelter strongly recommends I keep current with my tetanus and rabies immunizations and to consult my physician about this and any other concerns relating to working with animals. If I have any reason to suspect I am pregnant, the Richmond Animal Shelter recommends asking my physician about working with cats.

I also acknowledge that the senior staff person present is in full and total charge of the facility.

I hereby waive for my personal representatives and dependents all such claims or rights of action aforementioned and that the undersigned or my personal representatives and dependents may herein have against the Richmond Animal Shelter, their heirs, assigns, servants, agents and volunteers.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_

\_\_\_\_\_  
Signature (parents and guardians for all minors)      Please Print Name

\_\_\_\_\_  
Address – street, city, province and postal code

\_\_\_\_\_  
(Phone #)

**I am 19 years of age or older**                      **Yes**                      **No**                      **(circle one)**

\_\_\_\_\_  
Signature of RAPS representative                      Please Print Name

\_\_\_\_\_  
Date