



WHIPPET RESCUE AND PLACEMENT, INC. VOLUNTEER APPLICATION AND AGREEMENT

WHIPPET RESCUE AND PLACEMENT, INC (WRAP) is an incorporated group of individuals volunteering their time, money, love and efforts to rescue Whippets who have been abandoned, surrendered to animal shelters/humane societies, or surrendered to WRAP by their owners.

Volunteering a little bit of your time helps a homeless Whippet in countless ways, from transporting a dog to an appropriate foster or permanent home to actually being a good foster home.

Please take the time to complete this application and return it to the WRAP Regional Advisor for your area. After reviewing the information you provide, one of WRAP's Advisors will contact you regarding your time availability and the volunteer activities in which you have expressed an interest. Please do not be offended by all of the information WRAP seeks. WRAP is attempting to match your desires with WRAP's needs and the needs of homeless Whippets, all of whom have unique personalities and physical conditions. The more information you can provide, the more likely everyone involved will have a satisfactory volunteer experience and relationship.

PERSONAL INFORMATION

Name: _____

Street Address: _____
City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Work Phone _____

E-mail address: _____

Do you have a fenced yard? Yes ___ No ___ If yes, how high is the fence and of what type. _____
Is it tight to the ground? Yes ___ No ___

Your age: _____ Own or Rent Home? Own Rent

Please list all household members: Name, age, relationship to you.

Name	Age	Relationship to you

Your Occupation: _____ How long have you worked there? _____

Your Employer's Name & address: _____

DOG OWNERSHIP/EXPERIENCE

Do you currently own Whippets? Yes No If yes, for how many years _____

If yes, please list how many, their ages, male or female and whether they are spayed/neutered.

Dog's Name	Male or Female	Age	Spayed/neutered (yes/no)

Also, if yes, what activities do you participate in? Please check all that apply:

Conformation	<input type="checkbox"/>	Therapy Dog	<input type="checkbox"/>
Agility	<input type="checkbox"/>	Lure Coursing	<input type="checkbox"/>
Obedience	<input type="checkbox"/>	Racing	<input type="checkbox"/>
Other, Please explain			

Do you breed Whippets? Yes No If yes, how many litters have you had in the last 5 years _____

If you do not currently own Whippets, have you owned them in the past? Yes No If yes, when, for how long and what activities did you participate in;

Have you or do you own other sight hound breeds? Yes No If yes, please list those breeds _____

Do you have other dogs in addition to the Whippets listed above? Yes No If yes, please list how many, their ages, male or female and whether they are spayed or neutered.

Dog's Name	Male or Female	Age	Spayed/neutered (yes/no)

Please list any other breeds that you owned in the past:

Please indicate how your pets are kept:

Kennel set up - separate from home		Kenneled while at work	
Dog Room		In yard while at work	
Run of house		Dog door	
Crated While at work		Someone usually home all day	

How long are your own dogs left (or would a rescue foster be left) during the day? _____

Are your other pets used to being introduced to strange dogs? Yes No

Do you have any experience/training in any of the following dog-related areas of work? Please check all that apply.

Dog Grooming		Pet Store Sales	
Vet Assistant		Animal Rescue	
Kennel Assistant		Obedience or Agility Training	
Other, Please explain			

If you checked one or more of the above, please briefly explain the nature and extent of your work/training experience:

Name of your veterinarian: _____ Phone No _____ Fax No _____

Street Address: _____ City _____ State _____ Zip _____

Does your city, county or state have any ordinances relating to being a rescue volunteer? Yes No

If yes, please describe the ordinances: _____

Do you have a dog limit? Yes No If yes, what is that limit? _____

Are you or any members of your household currently volunteering with or working for another animal rescue organization?

Yes ___ No ___.

If yes, please list the name(s) of the organization(s), and what function or capacity you (or member of your family) provide for that Organization: _____

What type of services have you performed in the past, or are you performing now for other rescue organizations? _____

Rescue has many parts. Please check the areas below in which you willing to participate :

Intake for new Rescues		Transport	
Foster		Education at shows & Pet fairs	
Evaluate potential adopters			
Home check			

Please list all Dog Club Memberships (if any): _____

Positions held other than general member: _____

Are you a member of PETA Yes ___ No ___ HSUS Yes ___ No ___

Any other animal rights organizations? Yes ___ No ___ If yes, please list: _____

OTHER PETS/LIVESTOCK

Do you presently own:

• cat(s) Yes No If yes, how many and are they indoor or outdoor cats _____

• Other pet(s) or livestock Yes No

If yes, please indicate the following information on each type of livestock:

Species (horse, cattle, goats, etc)	How many	Would dogs be fenced separately?

Please list two personal references: Name, Phone #, Relationship: (not someone you live with)

- 1.
- 2.

ACKNOWLEDGMENT

Are you financially able to provide basic expenses before approved reimbursement would be provided from WRAP?
 Yes No

Have you ever been bitten/attacked by a dog? Yes No If Yes, please explain: _____

Are you comfortable approaching dogs that you do not know? Yes No

Do you understand that dogs may be unpredictable and that WRAP cannot guarantee that a dog we are attempting to rescue may become aggressive? Yes No

Are you willing to assume the risks involved with working with animals who are sometimes frightened and who are in unfamiliar surroundings and the possibility that the dog may become aggressive and/or bite you and/or another person or your other pets? Yes No

Some Whippets coming into rescue suffer from varying degrees of separation anxiety. Not everyone is set up to

deal with separation anxiety. Do you feel your home is suitable for these problem dogs or will we need to make other arrangements should one of these Whippets need fostering in your area? Yes No

If no, please explain: _____

Are you willing to keep a dog for an extended period of time until it is ready to be placed into the right home?

Yes No If no, please explain: _____

Are you willing to accept any risk involved in transporting a dog inside your vehicle? Yes No

What type of vehicle do you have for transporting dogs? _____
(If more space is needed, please add to last page of this form.)

How did you hear about WRAP? _____

Is your family supportive of your WRAP volunteer activities and would they get involved? Yes No

Briefly, please describe why you are interested in volunteering for a group dedicated to rescuing dogs, particularly Whippets.

AGREEMENT TO ABIDE BY AND FOLLOW WRAP POLICIES AND PROCEDURES

I understand that WRAP will determine the criteria for becoming a volunteer. If I am approved as a volunteer, I may always ask that WRAP find another volunteer to take over the care of a Whippet in my possession either by my decision or WRAP. I understand that I will be responsible to keep WRAP informed of any medical or emotional conditions that the Whippet may have, based upon information provided by the former owner or animal shelter/humane society. I understand that as a volunteer, I am expected to keep the Whippet secure and to care for it humanely.

WRAP retains ownership of all rescued Whippets until placed in their permanent home. I understand that a Whippet may need to occasionally be euthanized if it becomes sick or exhibits behavior problems making the Whippet unsuitable for placement as a companion animal.

I, _____, hereby agree to abide by the following terms during the time I am a volunteer for WRAP:

1. I will treat all Whippets as a responsible and humane pet owner.
2. I will not use any Whippet that comes to me through WRAP for breeding purposes of my own or allow it to be so used by any other person.
3. I will remember in all my dealings with the public that I represent WRAP.
4. I agree that any Whippet in my care remains the possession and property of WRAP until that Whippet is placed in a permanent home.
5. I agree that if I rescue for more than one organization, any rescue Whippet who comes into my possession, will be placed thru WRAP
6. I agree to follow WRAP Policies and Procedures

I have read and understand all of the statements above. I understand that any contact I have with a Whippet as a WRAP volunteer, is done at my own risk. If I am selected as a volunteer, I can ask at any time for a Whippet to be put with another volunteer that may be more suited to handle its problems. As a volunteer for WRAP, I acknowledge that WRAP is not responsible for any property damage or personal injury suffered by me, members of my household, third parties or my other



pets by any WRAP Whippet whom I come into contact with as a volunteer, and I assume all liability for providing adequate controls to prevent such damage or injury.

I accept full responsibility for any and all expenses incurred during my tenure as a volunteer and representative for WRAP, except for those pre-approved by WRAP. I further agree to keep records of all Whippets put into my care such as, release and adoption forms, monies collected and expenses incurred for each and every WRAP Whippet. I further agree that such records are the property of WRAP and that a representative thereof may request to view and/or obtain these records at any time. In the event I resign as a volunteer, whether voluntarily or by request of WRAP, I hereby agree to return any WRAP Whippet in my possession and all WRAP Whippet records over to WRAP within ten days of resignation or request date.

I have accurately completed this Volunteer Application and Agreement and I have read the above warnings and appreciate the risks involved in working with rescued Whippets. I understand that WRAP cannot be responsible for the actions, behaviors, and/or medical condition of the Whippets that it seeks to rescue, and I agree to assume the risks implicit in working with rescued Whippets which may have been abandoned, beaten or otherwise mistreated or abused, or who may suffer from an illness, condition or disease.

AGREED TO BY VOLUNTEER: _____ **DATE:** _____

ACCEPTED AND APPROVED BY WRAP REGIONAL ADVISOR: (print name) _____

Signature _____ **Date:** _____