

Golden Retriever Rescue Operated With Love Statewide- NY, Inc.

1 877 477-6957 (toll free)

www.growls.org

GRROWLS' MEMBER APPLICATION

Annual membership dues are \$25 per person; \$40 per family

Completed application and payment can be made to:

P.O. Box 6634, Syracuse, NY 13217

Attn: Membership Dues

**Required Information (please print):**

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

Applicant: \_\_\_\_\_

Co-Applicant (family membership only): \_\_\_\_\_

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

City, State, Zip Code, County: \_\_\_\_\_

Phone number(s) including area code and e-mail(s): \_\_\_\_\_

**Optional Information:**

If you are interested in volunteering in any of the following areas, please check and a GRROWLS member will contact you.

- Fostering
- Transport
- Home Visits (potential foster/adoptive homes)
- Evaluations
- Marketing/Fundraising/Event Planning
- Administrative Assistance
- Professional Services (veterinary &/or kenneling discounts, behavioral consulting, etc.)

If you would like to participate, but at a later date, please indicate the best date/time to contact you.

\_\_\_\_\_

Would you like to be notified of GRROWLS' events, fundraisers or training opportunities? Yes No

If yes, please indicate how you would like to be contacted. Phone E-mail Regular Mail

What type of training or dog experience do you have (please explain)?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

May we contact you for advice within your occupation?    Yes        No  
Occupation: \_\_\_\_\_

If you have agreed to volunteer for any of the above areas, please sign the agreement and certification below.

### AGREEMENT AND CERTIFICATION

The undersigned (hereafter referred to as "the volunteer") has agreed to volunteer his/her services or facilities to Golden Retriever Rescue Operated With Love Statewide-NY, Inc. (hereafter referred to as "GRROWLS").

The volunteer(s) acknowledges and understands that the dogs involved in GRROWLS' program may be untrained or in need of veterinary care, and that GRROWLS makes no representations whatsoever regarding the dog's temperament, health (including the presence or absence of diseases transmissible to humans or to other animals), age, ability, attitude or trainability.

The volunteer assumes all risks relating to working with the GRROWLS dog(s). The volunteer hereby releases GRROWLS, its officers, directors, participants, volunteers and affiliates from any and all claims, actions, liabilities, damages and costs of any kinds arising out of transportation, fostering, or any other work or activity with any dog connected with GRROWLS or a dog owned by a GRROWLS volunteer, excluding pre-approved reimbursable business expenses of those activities.

If anyone in the volunteer's household makes a claim, the volunteer will indemnify, defend, and hold GRROWLS and the GRROWLS participation harmless from such claims and costs.

Applicant Signature: \_\_\_\_\_

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

Applicant Signature: \_\_\_\_\_

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

Any personal information provided to GRROWLS-NY, Inc. will not be sold, leased or provided to third parties. GRROWLS-NY will only distribute your information to approved members of GRROWLS-NY for the explicit purposes of volunteering, fundraising and/or event coordination or other GRROWLS-NY sponsored activities.

If you have any questions, concerns or need clarification, please contact the number listed above.

Check if you do not wish to be contacted further.

Check if you do not wish your information disseminated.