

Blue Ridge Border Collie Rescue Inc.

Volunteer Information Form **Contact Information**

Name _____

Address _____ City _____ State _____ Zip _____

Day Phone Number: () _____ Evenings: () _____

Preferred time to call: _____ E-mail address _____

Areas of Interest

Circle all areas in which you would like to be involved:

Transportation Home evaluations Phone calls Rehabilitation (medical or behavioral)
Staffing information booths Waystation (one week max foster care) Clerical Fostering

Limitations

We will respect any limitations you specify below. If you have no restrictions, skip this section.

Limitations on transport:

No more than _____ hours and/or _____ miles round trip

Other:

Liability Release Statement

I certify that I have never been convicted of animal cruelty, neglect, or abandonment.

I, _____, release, discharge, and hold harmless Blue Ridge Border Collie Rescue, Inc., all individual volunteers, and anyone else associated with Blue Ridge Border Collie Rescue, Inc., from any charges or claims arising from, my participation in any action related to the activities of Blue Ridge Border Collie Rescue, Inc.

Signature _____

Date _____

Mail to:

Blue Ridge Border Collie Rescue, Inc. c/o Karin Readell, 3898 Wilderness Drive, Union Bridge, MD 21791