



IGCA Rescue Volunteer Application

Thank you for volunteering your services to IG rescue. Both for insurance and rescue purposes, we require the following information.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone (Home): _____ (Work): _____

(Fax): _____ (E-Mail): _____

Do you own Italian Greyhounds (IG's)? _____ How many? _____ Ages: _____
Where did you get your IGs from?

Are they spayed/neutered? Explain:

How long have you had IG's? _____
Your experience with the breed: (activities, training ...)

Please list other breeds/animals, their ages, and how many of each you own.

Are they spayed/neutered? Explain.

Have you ever turned an animal over to a shelter or rescue group? Explain:

Are you a breeder of IG's? _____ If so, number of litters bred in the past 5 yrs: _____

Do you have any plans to do future breeding?

Do you breed or sell other breeds/animals? _____ If so, number of litters bred in the last 5 yrs: _____
_____ What breed/type of animals _____

Name of other breed clubs and/or all-breed clubs to which you belong:

Name of any animal organizations you support:

Have you worked (formally or informally) in rescue before? If so, please describe your experience:

Have you worked with an IGCA Rescue Representative? _____ Who?

In which of the following areas are you willing to work?

- _____ Contact person for shelter
- _____ Transportation If so, how far _____
- _____ Home Visits
- _____ Fundraising
- _____ Foster Home – How long can you foster? (overnight, a few days, long term)

If interested in fostering are you aware and comfortable with the fact that many of the fosters may have issues (housebreaking, marking, barking, not crate trained, separation anxiety ...) ?

Are your current dogs crate trained and are you willing to crate train each foster?

Do you have a fenced yard? _____ Is it attached to your home with a house door that opens into it? _____ Do they have access to it when you are not home? _____

What type of fence and height? _____ Can it be opened from the outside? _____

Are you willing to have a home visit by an IGCA Rescue Rep? _____

Please list the hours a responsible adult would be home if you were fostering a rescue IG?

Do you have children in the home?

Where do your dogs stay when you are not at home?

Name and telephone number (with area code) of your veterinarian:

Name and telephone number (with area code) of veterinarian you would use for rescue (if different from above):

Name and telephone numbers (with area code) of two IG fanciers for reference purposes:

Please read and be sure you understand the following before signing:

I understand that it is my decision whether or not to foster any particular dog. I will not hold the IGCA or the Italian Greyhound Rescue Foundation (IGRF) responsible for any damage, injury or harm caused directly or indirectly by any dog I handle, or activities in which I engage as a volunteer for any IG rescue program.

I understand that it is not the policy of IGCA or IGRF to reimburse the costs incurred in the rescue of dogs without prior approval of that expense. I will not bring suit against IGCA or IGRF, its agents, volunteers, their heirs or estates in case of financial loss resulting from my activities as a rescue volunteer.

I also understand that in the future, my services as a volunteer may no longer be required. By signing this volunteer form, I agree that I have not entered into any contractual relationship for employment with the IGCA or IGRF. I further agree to immediately surrender, upon termination of my services, all records, receipts, equipment, or other property of IGCR or IGRF, and any foster dogs in my possession, to the Regional Rescue Advisor (or Rescue Rep to be determined by Advisor).

I agree to abide by the Rules, Regulations, Policies and Procedures set forth by the Italian Greyhound Club of America, Inc. Rescue Committee. I hereby agree that any money (adoption or general donations) that I collect or receive for IGCA Rescue will be turned over to the IGCA Treasurer. Additionally, I hereby certify that I am in good standing with the American Kennel Club and that I am at least 18 years of age.

Signature

Date

Thank you for your interest in helping with IGCA Rescue.

Please return this application to:

Lori Brown
94-1022 A Maiiau St.
Waipahu, HI 96797