

Lucky Dog Boarding & Training Center, LLC.  
1478 Mallard Street  
Detroit Lakes, MN. 56501

**VOLUNTEER APPLICATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone : (\_\_\_\_) \_\_\_\_\_ Alternate Phone : (\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Gender: \_\_\_ Male \_\_\_ Female

**References (list three people, not related to you, who have known you for at least two years and can speak about your character and skills related to working with animals):**

Name: \_\_\_\_\_ Phone Number : (\_\_\_\_) \_\_\_\_\_

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

Name: \_\_\_\_\_ Phone Number : (\_\_\_\_) \_\_\_\_\_

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

Name: \_\_\_\_\_ Phone Number : (\_\_\_\_) \_\_\_\_\_

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

**I have the following volunteer experience (type of company, role played, number of years, etc.):**

\_\_\_\_\_  
\_\_\_\_\_

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**Volunteer Liability Waiver**

I, \_\_\_\_\_ hereby agree that I am providing volunteer services to Lucky Dog Boarding & Training Center, assisting with Adopt a Pet animals and / or care of animals. I understand that neither Lucky Dog nor any of its employees are responsible for any injury, illness, or death caused by any animals that I come into contact with during my volunteer work. I understand that failure to follow rules and posted signs may result in injury and / or death. I agree to hold harmless and release from liability Lucky Dog should I become sick or injured from any animals as a result of my volunteer work.

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

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

Parents Signature if under 18 years of age: \_\_\_\_\_ Date: \_\_\_\_\_