



## **Our Mission**

**The Blue Bell Foundation for Cats offers loving and compassionate lifetime care for senior cats whose owners can no longer care for them.**

**(To apply, please complete this application and return to: Blue Bell Volunteers, 20982 Laguna Canyon Road, Laguna Beach, CA 92651)**

## **QUALIFICATIONS**

Minimum of 18 years of age

Love cats

Experience in caring for cats

Reliable

Able to dedicate volunteering time weekly/bi-monthly/monthly for a minimum of 6 months – 2 hour minimum volunteer time requirement per visit (you may stay longer if you wish)

Excellent work ethic

Agree to follow all Blue Bell policies and standards of care

Willing to attend new volunteer orientation and periodic cat care training/meetings

Provide three references

Interview with Volunteer Coordinator

Able to volunteer in Blue Bell fundraising events and Blue Bell clean up days

## **VOLUNTEER OPPORTUNITIES**

Cat companion\*

Email: [bluebellvolunteers@gmail.com](mailto:bluebellvolunteers@gmail.com)

Web: [bluebellcats.org](http://bluebellcats.org)

20982 Laguna Canyon Road, Laguna Beach, CA 92651 • 949.494.1586



Cat brushing

Social media assistance

Behavior observation

Fundraising

Sanctuary cleanliness

(\*Volunteers are only required to dedicate their time and energy to cat companionship – playing, petting and nurturing Blue Bell cats, but if any other Volunteer Opportunities interest you, your participation would be greatly appreciated)

### **GUIDELINES**

1. Volunteers are required to attend interviews, orientations and/or training as Blue Bell deems necessary. Volunteers are required to commit to a regular weekly/bi-monthly/monthly schedule for a minimum of 6 months unless otherwise stated on your application.
2. Volunteers should be polite and helpful at all times. All people and animals are to be treated with respect and courtesy. Volunteers are required to adhere to the rules explained in the training as it pertains to Blue Bell and the cats.
3. Volunteers are not to interfere with Blue Bell employees' work duties and tasks. Volunteers understand that Blue Bell employees care for the premises and the animals and their focus is the health and well-being of Blue Bell cats first.
4. Volunteers should refer questions from the public regarding Blue Bell policies to the staff only, to Susan Hamil, or the Volunteer Coordinator and Assistant Coordinator.
5. Volunteers should maintain confidentiality in regards to Blue Bell clients and business.
6. Volunteers must accept the guidance and decisions of the professional staff person responsible for volunteer activities. Problems and disagreements should be taken to the Volunteer Coordinator or Assistant Coordinator.
7. Volunteers are responsible for signing in and out of Blue Bell on the days they volunteer. Reasonable notice is required on a day Volunteer cannot attend his/her shift. Please contact (by email, telephone or text message) either the



Volunteer Coordinator or the Assistant Coordinator if you cannot attend your shift. (Blue Bell will allow shift substitutions, but not on a regular basis.)

8. For safety reasons, Volunteers are required to wear appropriate attire when working with animals.
9. Volunteers shall agree to Blue Bell's right to release Volunteer for unsafe practices, for not following the procedure described in orientation, training and/or the interview, or for any behavior that is inappropriate for Blue Bell business. Release will be determined by Blue Bell personnel only.
10. Any accident or injury to either a person or animal should be reported to a Blue Bell staff member/coordinator immediately.

(Please note: Our volunteer program does not accept applicants seeking to fulfill court assigned community service obligations)

## Personal Information

Name:		Date:	
Street Address:			
City:		State:	Zip:
Home Phone:		Work Phone:	Cell:
E-Mail Address:			
Date of Birth:		May we contact you at work if necessary?	
Employer:		Job Title:	
Volunteer organizations:		Role:	
Skills:			
Hobbies:			
Where did you hear about Blue Bell's Volunteer Program?			
Would you like to volunteer weekly? ( )	Every other week? ( )	Monthly? ( )	

Please indicate which days you prefer to volunteer and what times each day you are available to volunteer (we require a 2-hour minimum stay on each volunteer day):

Sun	Mon	Tue	Wed	Thur	Fri	Sat

Do you have a valid CA driver's license? Y ( ) N ( )

Do you have an insured vehicle you would be willing to drive to transport cats as part of your volunteer duties? Y ( ) N ( )

### Areas of Interest

Please check all of the following volunteer opportunities for which you have an interest:

- |   |   |
|---|---|
| <p>_____ Cat Companion</p> <p>_____ Cat Care Assistant</p> <p>_____ Blue Bell Gardens</p> <p>_____ Administrative Support</p> <p>_____ Foster Care</p> <p>_____ Educational Workshops</p> | <p>_____ Social Media</p> <p>_____ Special Events</p> <p>_____ Fund Raising</p> <p>_____ Public Relations</p> <p>_____ Photography/Video</p> <p>_____ Grant Writing</p> |
|---|---|

\_\_\_\_\_  
Visitor Tours  
\_\_\_\_\_  
Volunteer Program Support  
\_\_\_\_\_  
Special Projects  
\_\_\_\_\_

\_\_\_\_\_  
Website Maintenance  
\_\_\_\_\_  
Newsletter  
\_\_\_\_\_  
Graphic Design  
\_\_\_\_\_

## References

### Work

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

Phone #: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Length of time he/she has known you: \_\_\_\_\_

### Volunteer

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

Phone #: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Length of time he/she has known you: \_\_\_\_\_

### Personal

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

Phone #: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Length of time he/she has known you: \_\_\_\_\_

## Euthanasia Policy

Please read the following Euthanasia Policy and be prepared to discuss during your interview:

Blue Bell Foundation for Cats provides a safe and comfortable environment for cats accepted into the retirement sanctuary. Blue Bell does not practice routine euthanasia to create space for more cats. There are instances when Staff believes it is more important to stop the suffering rather than prolong the life of the cat.

The decision to euthanize will be made by Blue Bell's Board of Directors after a recommendation by Sanctuary Staff and an examination of the cat by a veterinarian determines the quality of life experienced by the cat. When it is determined that the cat will experience needless suffering in order to keep him/her alive, the cat will be humanely euthanized by a veterinarian.

## WAIVER AND RELEASE OF LIABILITY

The Waiver of Liability ("**Waiver**") is dated this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_ by and between (Print Your Name) \_\_\_\_\_, (hereinafter "**Volunteer**") and Blue Bell Foundation for Cats, a California not for profit foundation (hereinafter "Blue Bell").

### RECITALS

**Volunteer** wishes to donate his/her time, effort and services to assist Blue Bell in pursuit of its stated Mission. Volunteer is at least 18 years of age.

**Volunteer** recognizes and understands the inherent risks associated with the care of animals, including but not limited to the possibility of any injury to person and/or property which **Volunteer** may suffer as a result of the unpredictable nature and/or provocation of animals. **Volunteer** understands and acknowledges that Blue Bell will not be held responsible for any injuries, caused by the Blue Bell animals, the premises, the gardens, or while in the process of performing volunteer duties/responsibilities/tasks, and **Volunteer** will not hold Blue Bell responsible for any injury sustained by **Volunteer** while at Blue Bell or at any fundraiser/event/gathering/occurrence hosted or attended by Blue Bell or **Volunteer**.

Blue Bell desires to accept the donation of **Volunteer's** time, effort and services subject to **Volunteer's** agreement contained in this **Waiver**.

### AGREEMENT

In consideration of the mutual promises of the parties contained in the **Waiver**, or of the acts to be performed by either, that parties agree that **Volunteer** hereby knowingly and voluntarily waives any and all claims, damages or causes of action which **Volunteer** may have or incur against Blue Bell, its officers, directors, agents, affiliates and employees as a result of **Volunteer's** donation of his/her time and effort. **Volunteer** also agrees to uphold all Blue Bell policies, standards of care and procedures and understands that if **Volunteer** does not, Blue Bell reserves the right to cancel any further services by **Volunteer** at Blue Bell with or without cause. This **Waiver** shall be binding upon the parties hereto, their heirs, assigns and legal representatives.

**ORIENTATION**

Dates available for orientation and Blue Bell tour: \_\_\_\_\_

\_\_\_\_\_

Preferred times for orientation: \_\_\_\_\_

How may we contact you? \_\_\_\_\_

Do you accept texts? \_\_\_\_\_

Orientation date: \_\_\_\_\_

Coordinator Signature: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_