

VOLUNTEER QUESTIONNAIRE
OAKLAND COUNTY PET ADOPTION CENTER

DATE: _____

****YOU MUST BE AN OAKLAND COUNTY EMPLOYEE, 18 YEARS OF AGE OR OLDER, OR WITH A PARENT/GUARDIAN TO VOLUNTEER - FOR THE FITNESS UNLEASHED PROGRAM****

PLEASE PRINT LEGIBLY!

NAME: _____ D.O.B _____

ADDRESS: _____

CITY, STATE, ZIP: _____

WORK PHONE NO: _____

WORK EMAIL ADDRESS: _____

DEPARTMENT: _____

DOG WALKING RULES

1. Walk one dog at a time
2. Walk dogs to your ability
3. Do not leave a dog unattended for any reason
4. Do not allow interaction between dogs
5. Clean up after the dog
6. Dogs can only be walked by individuals 18 & up
7. Use caution when approaching or interacting with the public or other employees who may be using the County's sidewalks and parking lots
8. Return the dog directly to the Animal Shelter & Pet Adoption Center Employee who is onsite

I acknowledge these rules and agree to abide by them. I understand that failure to comply with any of these rules may result in immediate dismissal from dog walking for the Oakland Animal Shelter & Pet Adoption Center.

Signature: _____

Date: _____

Print Name: _____

THANK YOU FOR YOUR INTEREST!

*****SIGNED WAIVER AND RELEASE FORM MUST BE COMPLETED AND SUBMITTED WITH APPLICATION PRIOR TO VOLUNTEERING*****