



“FOR THE LOVE OF PUGS”

**Orlando Pug Rescue and Adoption, Inc.
Volunteer Application**

email: volunteer@orlandopugrescue.net
Fax: 407-857-4040
Mail: 9818 Sloane Street, Orlando, FL 32827

Please check the description that applies to you:

Volunteer only _____ Foster only _____ Volunteer & Foster _____

Name: _____

Address: _____

Driver's License #: _____

Birthdate: _____

Primary Contact Phone #: _____

Secondary Contact Phone #: _____

E-mail address: _____

Do you actively check your e-mail? Yes _____ No _____

What is your preferred method of contact? _____

If you are willing to volunteer for OPRA please mark the items you are interested in:

Fundraising Yes _____ No _____

This may include being involved with 2 to 3 smaller fundraisers during the year, participating in mailing and doing the necessary work to help with each fundraiser along with other volunteers involved. Also needed are volunteers with experience in grant writing.

Events Yes _____ No _____

This includes going to Petco and or PetsMart and participating in our major annual fundraiser every year along with other volunteers involved.

Crafts Yes _____ No _____

This includes sewing and other craft abilities. From time to time we may get items donated so we can create items to sell at fundraisers for profit to help raise funds for medical bills for our pugs in need.

Public Relations Yes _____ No _____

This will include finding vet offices to work with our rescue at a discounted rate, visiting shelters to check for pugs, watching the local newspaper for pugs and pet related events in the area and helping with marketing.

Shelter checks and newspapers watching can be divided up by county. If interested please write your name beside the county you would be available to help out in:

Orange: _____

Seminole: _____

Osceola: _____

Brevard: _____

Other: _____

Administrative Yes _____ No _____

This is to include updating forms, pamphlets, business cards, letterhead, etc. This will also include updating and/or helping to maintain our website and other internet sites we are involved with in posting our rescue

Internet Liaison Yes _____ No _____

This is to include volunteers who are able to participate in internet forums such as pug village and meet up groups. These volunteers will be responsible for keeping the rescue up to date on misc. events and also act as a liaison for the rescue.

Transportation Yes _____ No _____

This is to help transport newly surrendered pugs from their previous "owner" to their new foster home or destination decided by OPRA's foster coordinator.

Are you willing to also help transport pugs in foster care to and from vet appointments if the need arises?

Yes _____ No _____

Please describe any other skills you may have that we have not listed that you feel you would like to contribute to OPRA.

Do you know of any other people who would be interested in volunteering or fostering for OPRA? _____

If so please let us know their contact information

FOR FOSTER PARENTS ONLY TO FILL OUT

Due you or anyone in your household have any medical condition which may prevent you from caring for a pug placed in your home? _____

If you answered yes, please explain.

Will you foster a rescue with any of the following conditions? Please check all that may apply.

Kennel cough _____ Aggressive dogs _____ Seniors only _____
Behavior problems _____ Mother & Puppies _____ Puppies only _____
Injured _____ Not housebroken _____ Special needs _____
Female _____ Male _____

Please mark what you are able to provide for your foster dog:

Food: Yes _____ No _____

Crate: Yes _____ No _____

Collar/Leash: Yes _____ No _____

Shampoo: Yes _____ No _____

Toys: Yes _____ No _____

Monthly Heartworm preventative: Yes _____ No _____
(Brand must be approved by your Foster Coordinator before administration)

Frontline/Advantage (if needed): Yes _____ No _____
(These are the only approved brands authorized by OPRA any other brand must be authorized)

Are you willing to do home checks for potential adoptive parents in your area if the need arises?
Yes _____ No _____

Please note all food and medications prescribed by a veterinarian are paid for by the rescue. Some dogs in our care must be on a special diet and on prescription medication due to medical condition.

Reimbursements: All expenses must be authorized in advance by your foster coordinator or treasurer. In order to get reimbursed for an authorized expense please turn in your receipt and make sure it is marked paid. Receipts can be mailed, e-mailed or faxed.



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Orlando Pug Rescue & Adoption Contact Information

**Mailing address: 9818 Sloane Street
Orlando, FL 32827**

Retha Puvogel 407-909-4764
e-mail retha@orlandopugrescue.net

President, Foster/Surrender Coordinator

Susan Ellzey 407-857-8151
e-mail susan@orlandopugrescue.net
Secretary/Treasurer

Jessica Wadsworth 407-718-7469
e-mail hugapug@cfl.rr.com
Adoption Coordinator

Fax number: 407-857-4040