

VOLUNTEER APPLICATION

Please print clearly.

Date:					
Name					
Mailing Address					
Home Telephone	Cell/Bu	usiness Teleph	one	E-r	mail
□ Over 18 □ Under 18. Actual age if under 18:					
Emergency Contact:					
Name:	Rela	ntionship:		Phone #:	
Have you volunteered anywhere before?					
What were your responsibilities?					
Have you ever taken care of animals before? ☐ Yes ☐ No If yes, explain					
I am Interested in working with:					
☐ Cats only. ☐ Dogs only. ☐ Cat & Dogs! ☐ Office work only.					
Reason for Volunteering:					
☐ Just love animals!					
☐ School Community Service hours. # of hours needed:					
Court Mandated. Reason: # of hours needed:					
Availability:					
Mon: Tue: W	Ved:	Thu:	Fri:	Sat:	Sun:
Signature of Volunteer					
Signature of Parent or Guardian if 1	l8 years or u	nder			