



EDUCATION.  
RESCUE.  
RESPONSIBILITY.

## VOLUNTEER INFORMATION FORM

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

NAME: \_\_\_\_\_ DOB \_\_\_\_\_

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

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

Phone(Day):(\_\_\_\_\_) \_\_\_\_\_ (Evenings)(\_\_\_\_\_) \_\_\_\_\_

OCCUPATION \_\_\_\_\_ Email \_\_\_\_\_

Have you ever volunteered at an animal shelter? YES /NO Where/When \_\_\_\_\_

What kind of work would you like to donate? (circle as many as you like )

Fostering - Feral feeder - Trapping – Donation Collection – Grant Writing –  
Fundraising – Publicity – Transportation - Adoptions

When are you available to volunteer M \_\_\_\_\_ T \_\_\_\_\_ W \_\_\_\_\_ Th \_\_\_\_\_ F \_\_\_\_\_ Sat \_\_\_\_\_ Sun \_\_\_\_\_

Foster care (check): bottle babies \_\_\_\_\_ socialize feral kittens \_\_\_\_\_ special needs cats (FIV/felv) \_\_\_\_\_ feral  
adults \_\_\_\_\_ moms with kittens \_\_\_\_\_ Pregnant cat \_\_\_\_\_ kittens \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone:(\_\_\_\_\_) \_\_\_\_\_

Relationship: \_\_\_\_\_ Alternate Phone: (\_\_\_\_\_) \_\_\_\_\_

Any other Information you would like to share with us?

---

---