

VOLUNTEER APPLICATION – HUMANE SOCIETY OF DAVIE COUNTY

DATE: _____

NAME: _____

DATE OF BIRTH: ____/____/____ (NOTE :minimum age for youth volunteers is 13; if youth is under 16 a parent/guardian will have to be present with minor. All under 18 must have permission from Parent/Guardian.)

ADDRESS: _____

PHONE NUMBER(S): _____ EMAIL: _____

What days are you most likely to volunteer?

- Monday Time of Day _____
- Tuesday Time of Day _____
- Wednesday Time of Day _____
- Thursday Time of Day _____
- Friday Time of Day _____
- Saturday Time of Day _____
- Sunday Time of Day _____

What animals are you willing to work with?

- Dogs
- Cats
- Both

Do you have any allergies or medical concerns that could be affected in this environment?

What kind of work would you like to do at the Adoption Center?

- | | |
|---|--|
| <input type="checkbox"/> Walk/Play with Dogs | <input type="checkbox"/> Clean Litter Boxes |
| <input type="checkbox"/> Scoop Dog Runs | <input type="checkbox"/> Play/Pet/Brush Cats |
| <input type="checkbox"/> Do Laundry | <input type="checkbox"/> Sweep/Mop Floors |
| <input type="checkbox"/> Office Work | <input type="checkbox"/> Train Obedience to Dogs |
| <input type="checkbox"/> Publicity/Newsletter Writing | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Other: _____ | |

Any other information about yourself that you'd like to share:
