

## Putnam County Animal Care and Control



## **Volunteer Form 2019**

Name		
Address		
City		StateZip
Phone	email	
Date of Birth		nust be accompanied by a legal guardian a form for parent/guardian. Minimum age: 1
Check one:		
I wish to work in the store		I wish to work in the animal shelter
pricing on animals  I will not hold the H volunteer duties.	and store items).	or any work performed. (This includes special any injury that occurs while performing my
My availability is as follows:		
Monday:	Tuesday:	
Wednesday:	Thursday:	
Friday:	Saturday:	
Signature:	Date:	





## **Volunteer Application**

Name:	Date:		
Address:			
	State:	Zip:	
Phone #:	Email:		
	*Age 14 minimum; under 16 must l dian at all times – please complete an		
Please initial each statement in agr	eement:		
	ask for compensation for my work per s or items for sale at Rescued Treasure		
I will not hold the Humane s volunteer duties	Society responsible for any injury that	occurs while performing	
We need volunteers that can comr to regularly?	nit to a consistent schedule. What ho	urs are you available to commit	
Wednesday:	Thursday:		
Friday:	Saturday:	*,	
Which of the following volunteer d	uties are you most comfortable with (	please check all that apply):	
Clean indoor dog kennels	Clean outdoor dog kennels	Clean cat kennels	
Clean outdoor areas	Clean lobby	Clean break room	
Clean bathrooms	Clean food room	Wash dishes	
Walk dogs	Bathe dogs	Socialize cats	
Groom cats	Feed/water dogs	Water cats	
Assist w/ meet & greets	Assist with adoptions	Laundry	
Assist w/ anything	Assist w/ answering phones & greeting public		
Signature:		Date:	