LEAGUE FOR ANIMAL PROTECTION

of Huntington, Inc.

WE ARE A NON-PROFIT, ALL-VOLUNTEER ORGANIZATION. VOLUNTEERS ARE ALWAYS NEEDED

EXPAND YOUR LIFE - VOLUNTEER!

You must be 18 years of age or older to volunteer with the League for Animal Protection. Sorry, no exceptions.

VOLUNTEER APPLICATION

DATE_____

NAME:_____ HOME PHONE _____

ADDRESS:_____ WORK PHONE _____

CITY, ZIP:_____ E-MAIL:_____

ARE YOU EMPLOYED? YES___ NO___ WHERE?_____

POSITION HELD:_____ DAYS/HOURS AVAILABLE:_____

_____

HAVE YOU HAD ANY FORMAL EXPERIENCE IN PET CARE?_____

LIST OTHER HUMANE GROUPS YOU BELONG TO: _____

HOW MANY PETS DO YOU OWN? CATS_____ DOGS_____ OTHER_____

WOULD YOU LIKE TO VOLUNTEER AT THE **"GRATEFUL PAW" CAT SHELTER**? _____

(SEE NEXT PAGE FOR DOG PROGRAM VOLUNTEER INFORMATION)

IF YES, CIRCLE SPECIFIC AREAS OF INTEREST BELOW:

CAT SHELTER RELATED ACTIVITIES

Animal Caretaker
Involves duties relating to the care of cats and kittens in the Grateful Paw Cat Shelter such as feeding, cleaning kennel areas and cages, laundry, scooping litter pans, sweeping floors, brushing cats, trimming nails, cleaning ears, socializing shy cats, encouraging play activities to enhance their adoptability.

Public Service/Office
Involves working with visitors interviewing prospective adopters and helping them select appropriate cats and kittens for adoption, educating first-time cat owners in essentials of good home care, explaining shelter policies, answering telephone queries re help for sick or injured animals, lost and found procedures, referrals to other agencies.

www.LAPhuntington.org

Box 390 • Huntington, NY 11743 • (631) 757-4517

WOULD YOU LIKE TO VOLUNTEER FOR OTHER ACTIVITIES CONNECTED WITH THE ORGANIZATION? IF YES, CHECK OFF AREAS OF INTEREST:

SPECIAL INTERESTS

___ Transporting animals to and from vets (usually during day)
___ Foster home care for cats/kittens
___ Maintenance of building (small repair jobs)

WOULD YOU LIKE TO VOLUNTEER WITH THE DOG ADOPTION PROGRAM? _____
IF YES, CHECK OFF AREA OF PARTICULAR INTEREST:

WALKING DOGS.....____

GROOMING/SOCIALIZING.....____

FOSTER HOME CARE FOR DOGS/PUPPIES.....____

TRANSPORTING DOGS TO VETS.....____

DOG ADOPTION ADVERTISING.....____

DO YOU HAVE ANY PHYSICAL OR MEDICAL LIMITATIONS OR DISABILITY THAT MIGHT HINDER YOU FROM PARTICIPATING IN ANY AREA OF THE PROGRAM. (HEART CONDITION, BACK INJURY, ALLERGIES, ETC.) IF YES, PLEASE EXPLAIN:

_____

EMERGENCY NOTIFICATION (Person to call in case of emergency):

NAME_____HOME PHONE_____

RELATIONSHIP_____WORK PHONE_____

DO YOU HAVE ANY QUESTIONS ABOUT THE PHILOSOPHY AT THE LEAGUE FOR ANIMAL PROTECTION?_____

AS A VOLUNTEER, I UNDERSTAND THAT WORKING WITH ANIMALS CAN BE A RISK. I AGREE TO ASSUME FULL RESPONSIBILITY IF AN ACCIDENT OR PROPERTY DAMAGE WERE TO RESULT AND THAT THE GRATEFUL PAW AND THE LEAGUE FOR ANIMAL PROTECTION OF HUNTINGTON, INC. IS RELEASED FROM ANY RESPONSIBILITY.

_____
(Signature)