

VOLUNTEER APPLICATION



Please Print

Date: _____

Name: _____

Email Address: _____

How often do you check your email? _____

Address: _____

City: _____ State: _____ Zip code: _____

Phone Numbers: Home (_____) _____

Work (_____) _____ (May we contact you at work? Y N)

Place of Employment: _____

• Have you ever adopted a cat from OAR? _____ Yes _____ No

• Why are you interested in volunteering? _____

• Why with our organization? _____

• Previous volunteer experience _____

• Would you be willing to:

_____ Do daily cat care at the rescue (2-hour shift once a week)

_____ Do cat socialization at the rescue

_____ Do cat socialization/foster in your home

_____ Assist in new building remodeling (painting, carpentry, etc.)

_____ Help with Trap-Neuter-Return of feral cats

_____ Be a substitute feral colony caretaker

_____ Check phone messages

_____ Mail information packets to callers

_____ Assist with capital campaign fundraising

_____ Assist with garage sale (April – event in late June)

_____ Assist with eBay auction (July – event in late November)

_____ Assist with informational tables at shopping centers and other venues

Specialities or skills _____

• Are you at least 18 years of age? _____ Yes _____ No If NO, how old? _____
(If under 18, must be accompanied by parent or guardian)

Do you have pets at home? Yes cats _____ dogs _____

Which veterinarian do you use: _____

• How did you learn about OAR?

_____ OAR Web page

_____ Newspaper

_____ Advertisement

_____ A friend who volunteers at OAR

_____ Volunteer Match

_____ Other _____

Which one? _____

Where? _____

Who? _____

?