



TERREBONNE PARISH ANIMAL SHELTER
 100 GOVERNMENT STREET GRAY, LA
 985-873-6709

Volunteer Application

APPLICANT INFORMATION

| | | | |
|---------------------------------------|------|------------|------|
| Name | Last | First | Date |
| Address | | | |
| Home phone | | Cell phone | |
| Email | | | |
| Emergency contact name & phone number | | Age | |

AREAS OF INTEREST:

Check all that apply

| | | | |
|--------------------------|-------------|--------------------------|-------------------|
| <input type="checkbox"/> | Dog care | <input type="checkbox"/> | Dog socialization |
| <input type="checkbox"/> | Cat care | <input type="checkbox"/> | Cat socialization |
| <input type="checkbox"/> | Clerical | <input type="checkbox"/> | Foster home |
| <input type="checkbox"/> | Transport | <input type="checkbox"/> | Adoption events |
| <input type="checkbox"/> | Photography | <input type="checkbox"/> | Running errands |
| <input type="checkbox"/> | Fundraising | <input type="checkbox"/> | Other _____ |

PAST EXPERIENCES:

Check all that apply:

| | | | |
|--------------------------|-------------------------|--------------------------|-----------------|
| <input type="checkbox"/> | Dog training | <input type="checkbox"/> | Cat care |
| <input type="checkbox"/> | Grooming | <input type="checkbox"/> | Dog care |
| <input type="checkbox"/> | Fundraising | <input type="checkbox"/> | Foster care |
| <input type="checkbox"/> | Adoption events | <input type="checkbox"/> | Office/Clerical |
| <input type="checkbox"/> | Other (Please explain): | | |

AVAILABILITY (INDICATE TIMES)

| | |
|-----------|----------|
| Sunday | Thursday |
| Monday | Friday |
| Tuesday | Saturday |
| Wednesday | |

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

| | |
|---------------|------|
| Signature | Date |
| Printed name: | |